

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

P98000014446

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 FEB 13 AM 9:33

Allied Lending Corporation,
Inc

☒ Art of Inc. File 500002428985--7
LTD Partnership File 02/12/98-01059-021
Foreign Corp. File ****122.50 ****122.50
L.C. File _____
Fictitious Name File _____
Trade/Service Mark _____
Merger File _____
Art. of Amend. File _____
RA Resignation _____
Dissolution / Withdrawal _____
Annual Report / Reinstatement _____
☒ Cert. Copy _____
Photo Copy _____
Certificate of Good Standing _____
Certificate of Status _____
Certificate of Fictitious Name _____
Corp Record Search _____
Officer Search _____
Fictitious Search _____
Fictitious Owner Search _____
Vehicle Search _____
Driving Record _____
UCC.1 or 3 File _____
UCC 11 Search _____
UCC 11 Retrieval _____
Courier _____

W98-3206

Signature _____

Requested by: 82

Name

Date

Time

2/12/98 11:07

Walk-In _____

Will Pick Up _____

RECEIVED
98 FEB 12 PM 12:17
DIVISION OF CORPORATIONS

RP
02-13-98



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

February 12, 1998

CAPITAL CONNECTION, INC.
417 E. VIRGINIA ST.
STE. 1
TALLAHASSEE, FL 32302

SUBJECT: ALLIED LENDING CORPORATION, INC.
Ref. Number: W98000003206

We have received your document for ALLIED LENDING CORPORATION, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

PLEASE ELIMINATE ONE (1) CORPORATE SUFFIX FROM THE CORPORATION NAME.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6878.

John Nedeau
Document Specialist

Letter Number: 898A00008289

ARTICLES OF INCORPORATION

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 FEB 13 AM 9:33

OF

ALLIED LENDING CORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation is **ALLIED LENDING CORPORATION**

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is **1400 West Oak Street, Suite A, Kissimmee, Florida 34741.**

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is seven thousand five hundred (7,500) shares having a par value of (\$1.00) per share.

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is **S. Craig Wakefield, Esq., Wakefield & Associates, P.A., 1400 West Oak Street, A, Kissimmee, Florida 32741.**

ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

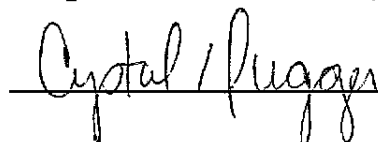
ARTICLE VI: INITIAL BOARD OF DIRECTORS

The name and address of each member of the initial Board of Directors of the corporation is **Director/President, Michael R. Johnson, 1165 John Ridge Ct., Kissimmee, FL 34747.**

Vice President/Secretary/Treasurer, S. Craig Wakefield, 1400 West Oak Street, Suite A, Kissimmee, FL 34741.

The undersigned has executed these Articles of Incorporation this 12th day of February 1998.

"Capital Connection, Inc. by Crystal Dugger, Office Manager"



**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 FEB 13 AM 9:33

Pursuant to the provisions of Section 607.0501, Florida Statutes, the mentioned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: Allied Lending Corporation.
2. The name and street address of the registered agent and office is: S. Craig Wakefield, Esq., Wakefield & Associates, P.A., 1400 West Oak Street, Suite A, Kissimmee, Florida 32741.

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.



S. CRAIG WAKEFIELD