

TRANSMITTAL LETTER

P98000020958

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

400002447034--2
-03/04/98--01079--006
*****78.75 *****78.75

SUBJECT: MADISON MORTGAGE + FUNDING CO.
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: LESLIE KAPLAN
Name (Printed or typed)

1120 FAIRVIEW LANE
Address

SINGER ISLAND FL 33404
City, State & Zip

561 840-2006
Daytime Telephone number

FILED
98 MAR -4 AM 10:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3/5/98 - YCM

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

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 shall be:

MADISON MORTGAGE + FUNDING CO.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1120 FAIRVIEW LANE
SINGER ISLAND, FL - 33404 -

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

400

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

LESLIE KAPLAN
1120 FAIRVIEW LANE
SINGER ISLAND, FL 33404

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

LESLIE KAPLAN
1120 FAIRVIEW LANE
SINGER ISLAND FL 33404

Leslie Kaplan

Signature/Incorporator

3-1-98

Date

(An additional article must be added if an effective date is requested.)

Having 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 obligations of my position as registered agent

Leslie Kaplan

Signature/Registered Agent

3-1-98

Date

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TALLAHASSEE, FLORIDA