

TRANSMITTAL LETTER

*P98000023575*

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 MAR 12 PM 1:34

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

600002446916--9

a check for: 03/04/98 01067-016

☐ \*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: COUNTYWIDE FINANCIAL SERVICES, INC.

(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: FAZAL A ALI

Name (Printed or typed)

1953 CASSAT AVE

Address

JACKSONVILLE FLA 32210

City, State & Zip

904-388-8600

Daytime Telephone number

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

D. BROWN MAR 12 1998

*789,135,2551,2550  
2/98-4903*

*3*



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

March 5, 1998

FAZAL A. ALI  
1953 CASSAT AVENUE  
JACKSONVILLE, FL 32210

SUBJECT: COUNTYWIDE FINANCIAL SERVICES INC.  
Ref. Number: W98000004903

We have received your document for COUNTYWIDE FINANCIAL SERVICES INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

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) 487-6972.

Doris Brown  
Document Specialist

Letter Number: 098A00012160

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

98 MAR 12 PM 1:34

## 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:

COUNTYWIDE FINANCIAL SERVICES, INC.

### ARTICLE II PRINCIPAL OFFICE

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

1953 CASSAT AVE

JACKSONVILLE FLA 32210

### ARTICLE III SHARES

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

1500.

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS


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

FAZAL A ALI  
2575 BOTTOMRIDGE DR  
ORANG PARK FLA 32065

### ARTICLE V INCORPORATOR

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

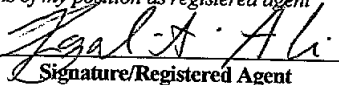
FAZAL A ALI  
2575 BOTTOMRIDGE DR  
ORANG PARK FLA 32065

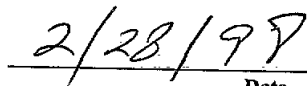
  
Signature/Incorporator

  
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.

  
Signature/Registered Agent

  
Date