(SAMPLE LETTER OF TRANSMITTAL)

DATE 4-14-98

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

500002490875---5 -04/16/98--01089--008 /**46** ****122.50 ****122.50

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours.

Victor Carners
(Individual's Name)

NATIONAl Mortgage Lender Network (Name of Corpbration) Inc

—— MAILING ADDRESS OF CORPORATION ——				
"""""""""""""""""""""""""""""""""""""				
106-				
18620 NW 67AVE				
Suite 351				
JUITE JS!				
Mirwi FloridA				
				
33015				
PHONE —				
· · · · - · ·				
(305) 829-3800 Area Code Number Ext				
Area Code Number Ext				
· · · · · · · · · · · · · · · · · · ·				

ARTICLES OF INCORPORATION

Matina Mantage / au	of Alabanak	T.10
NATIONAL Mortgage Lew	of corporation)	
The undersigned acting as the incorporators of a corporate following articles of incorporation for such corporation:	ation under the Florida Bus	iness Corporation Act, adopt(s)
ARTICLE I	CORPORATE NAME	
The name of the corporation is: NATIONAL MORTGAGE	ge Lender's	Network ING
ARTICLI	E II - DURATION	
This corporation shall exist perpetually unless dissolve	d according to Florida law.	
ARTICL	E III - PURPOSE	
The corporation is organized for the purpose of engage United States and the State of Florida.	ng in any activities or busin	ess permitted under the laws of the
The corporation is authorized to issue 500 sha	TIAL PRINCIPAL OFFICE	
STREET ADDRESS 18570 NW	67Ave Si	pite 351
	FLORIDA	ZIP 33015
CITY MIAMI Mailing address, if different	PLORIDA	211 33011
STREET ADDRESS		
CITY	FLORIDA	ZIP
ARTICLE VI - INITIAL RI	EGISTERED OFFICE AN	ID AGENT
The street address of the initial registered office	and the name of the initia	l registered agent at the office is:
NAME ROSA UREA		
ADDRESS 18520 NW 67AV	e suite	351
CITY WIA	FLORIDA	ZIP 33015

ARTICLE V	/II - INITIAL BOARD	OF DIRECT	ORS .		
This corporation shall have		directors initia	lly. The numbe	r of directo	ors may be s and
diminished from time to time	by the By-Laws, but sh	all never be le	ss than one (1)	. The name	
ddresses of the initial director(s) of the corporat	Holl dro do re-	· · · · · · · · · · · · · · · · · · ·			
NAME MICTOR CAINE	ero				
	67 AUR	Suite	<u>351</u>		
CITY MIAMI	STA	TE FI	orida	ZIP 3	30/5
NAME					
ADDRESS				· ·	
CITY	ST	ATE		ZIP	
NAME					
		1.			
ADDRESS	S'	TATE	in the second se	ZIP	
CITY	RTICLE VIII - INCO	POPATORS			
				:	
The names and addresses of the incorporators	signing these Articles of	- Incorporation			
NAME			:		
ADDRESS			<u>.</u> 		
CITY	S	TATÊ		ZIP	
NAME					<u> </u>
ADDRESS					
CITY		STATE		ZIP	
NAME		· · · · · · · · · · · · · · · · · · ·			
ADDRESS			ateut 14.		
CITY		STATE		ZIP	
The undersigned incorporator(s) have ex	recuted these Articles	of Incorporat	tion this		
day ofApril 14	, 19	98/			
day of		$1/\Omega$			
		Just	((Signature)
	· ·				
				((Signature)
					>
					(Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

NATIONAL MOI	TGAGE	Lewders	Network	INC.
	(name of co	orporation)		

Pursu	iant to Florida St	atutes Section	ns 48.091 and 60	7.0501, the following is	submitted:
The a	above corporation	n, organized	under the laws of	the State of Florida with	its registered office
as inc	dicated in the Art	icles of Inco	rporation	_	
at	18520	WW.	67AUR	suite 351	
	MIAM	i Fl.	33015		<u> </u>
has n	amed #	305 h //	001	_	_

located at the aforesaid address, as its registered agent to accept service of process within this state.

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.

Hose fue 4-14-98 (Date)