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TRANSMITTAL LETTER

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

NEW LIFE MORTGAGE COMPANY

SUBJECT:

~~NEW LIFE MORTGAGE COMPANY, 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

FROM:

Mr. Joe Marting

Name (Printed or typed)

490 N.E. 129th Street

Address

Miami, FL 33161

City, State & Zip

561  
305 / 434-9111

Daytime Telephone number

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 AUG 13 AM 8:42

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

8-17  
WS

**ARTICLES OF INCORPORATION**  
**OF**  
**NEW LIFE MORTGAGE COMPANY**

FILED STATE  
SECRETARY OF CORPORATIONS  
98 AUG 13 AM 8:42

The undersigned, for the purpose of forming a corporation for profit under the laws of the State of Florida, hereby adopt the following Articles of Incorporation:

**ARTICLE I**

The name of this Corporation shall be **NEW LIFE MORTGAGE COMPANY**

**ARTICLE II**

**DURATION**

This Corporation shall have perpetual existence unless dissolved pursuant to law and shall commence business as of the date of filing of these Articles of Incorporation.

**ARTICLE III**

**GENERAL NATURE OF BUSINESS**

This corporation may engage in any activity of business permitted under the laws of the State of Florida; said corporation's primary purpose shall be in the business of mortgage services and all other related matters.

**ARTICLE IV**  
**CAPITAL STOCK**

This Corporation is authorized to issue 100 shares of \$1.00 par value common stock, to be owned as follows: 50% to be owned by the President and 50% by the Vice-President.

**ARTICLE V**  
**PRINCIPAL PLACE OF BUSINESS**

The principal place of business of this Corporation is: 1100 N.E. 163rd Street # 302, North Miami Beach, Fl. 33162 with the privilege of having branch offices at other places within or without the State of Florida.

**ARTICLE VI**  
**OFFICERS AND DIRECTORS**

The names and post office address of the initial officers and directors who shall hold office for the first year of the corporation's existence or until their successors are elected are:

**Juan Schwartzman (President )** 16216 S.W 92nd Avenue, Miami, Fl. 33157

**Joe Martinez (Vice-President)** 490 N.E 129th Street, Miami, Fl. 33161.

**ARTICLE VII**  
**INCORPORATOR**

The name and address of the person signing these Articles is:

**Juan Schwartzman**  
16216 S.W 92nd Avenue  
Miami, Fl. 33157

**ARTICLE VIII**  
**REGISTERED OFFICE AND REGISTERED AGENT**

The name of the registered agent and the street address of the initial registered office of this Corporation is:

**Joe Martinez**  
**490 N.E 129th Street**  
**Miami, FL 33161**

**ARTICLE IX**  
**BY-LAWS**


The power to adopt, alter, amend or repeal By-Laws shall be vested in the Board of Directors and shareholders.

**ARTICLE X**  
**AMENDMENTS**

This Corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation or any Amendment hereto and any right conferred upon the Stockholders is subject to this reservation.

  
JUAN SCHWARTZMAN (PRESIDENT)

**IN WITNESS WHEREOF**, the undersigned, being the original incorporator to the Articles of Incorporation herein, for the purpose of forming a corporation to do business both within and without the State of Florida, under the laws of Florida, do make and file these Articles, hereby declaring and certifying that the facts herein stated are true, this 2nd Day of August, 1998

  
Juan Schwartzman

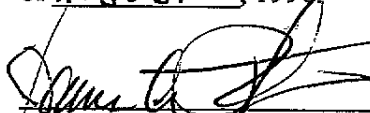
STATE OF FLORIDA )

COUNTY OF DADE )

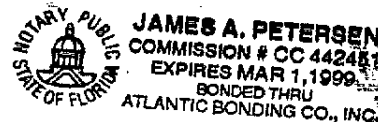
**BEFORE ME**, the undersigned authority, personally appeared **JUAN SCHWARTZMAN** who after being first duly sworn, deposes and states, that he signed the foregoing Articles of Incorporation for the purposes stated therein expressed.

WITNESS my hand and official seal at the State and County aforesaid, this 11<sup>TH</sup> day

of August, 1998.

  
NOTARY PUBLIC

My commission expires:



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

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designation the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: **NEW LIFE MORTGAGE COMPANY**
2. The name and address of the registered agent and office is:

**JOE MARTINEZ**  
**490 N.E. 129th Street**  
**Miami, Fl. 33161**

I 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 OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

  
JOE MARTINEZ

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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