Palm (6) City/State/ 904-4	ARTIVEZ questor's Name 352169 Address AS+1F1.32135-216 Zip Phone # 46-4473 NAME(S) & DOCUMENT NUM	Office Use Only
1. MORTZ (Corp. 2. (Corp. 3. (Corp.	oration Name) (Do oration Name) (Do oration Name) (Do	ocument #) ocument #) ocument #) -08/27/9801004007 *****122.50 *****122.50
☐ Mail out ☐	Pick up time Will wait Photocopy	Certified Copy Certificate of Status
NEW FILINGS	AMENDMENTS Amendment	
Profit NonProfit	Resignation of R.A., Officer/ Dire	ector
Limited Liability	Change of Registered Agent	
Domestication	Dissolution/Withdrawal	
Other	Merger	ECRI
OTHER FILINGS Annual Report Fictitious Name Name Reservation	REGISTRATION/ QUALIFICATION Foreign Limited Partnership Reinstatement	98 AUG 27 PH 4: 55 SECRETARY OF STATE TALLAHASSEE, FLORIDA
	Trademark Other	T.SMITH MIG 26 1998

Examiner's Initials

ARTICLES OF INCORPORATION

of

Ci Ci					
MORTGAGE (name of corp	7R0_	INC			
(name of corp	poration)				·
The undersigned acting as the incorporators of a corporation the following articles of incorporation for such corporation:	under the Flo	orida Busine:	ss Corpor	ation Act	t, adopt(s)
ARTICLE 1 - CORF	PORATE NAM	ME		SE 01	}
The name of the corporation is: MORTGAGE	E PR	0 [N	AITIASSEE	HIG 27	7
ARTICLE II - I This corporation shall exist perpetually unless dissolved according to the corporation of th		rida law.	, FLORID)F_\$TATE	Ö
This corporation snall exist perpetually unless disserved des			Þ	01	
ARTICLE III -					
The corporation is organized for the purpose of engaging in United States and the State of Florida.	any activities	s or business	permitte	d under t	he laws of t
ARTICLE IV - CA					
ARTICLE IV - CA The corporation is authorized to issue	common sto	ck, par value		00	per sha
The corporation is authorized to issue	common sto	ck, par value		00	per sha
The corporation is authorized to issue	common sto	ck, par value		00	per sha
The corporation is authorized to issue	common sto	ck, par value		ZIP =	
The corporation is authorized to issue	PRINCIPAL rent, the mail	ck, par value			
The corporation is authorized to issue	PRINCIPAL rent, the mail	ck, par value			
The corporation is authorized to issue	PRINCIPAL rent, the mail	ck, par value			
The corporation is authorized to issue	PRINCIPAL rent, the mail	ck, par value			
The corporation is authorized to issue	PRINCIPAL rent, the mail	ck, par value	is:	ZIP	32117
The corporation is authorized to issue	PRINCIPAL rent, the mail	ck, par value OFFICE ing address i	AGENT	ZIP =	32117
The corporation is authorized to issue	PRINCIPAL rent, the mail	ck, par value OFFICE ing address i	AGENT	ZIP =	32117
The corporation is authorized to issue	PRINCIPAL rent, the mail	ck, par value OFFICE ing address i	AGENT	ZIP =	32117

ARTICLE VII - INITIAL BO	OARD OF	DIRECT	'ORS
--------------------------	---------	--------	------

NAME	STE.	PHEN W	1. HALL	<u> </u>		
ADDRESS	182	ROYAL	DUNES	CR		
CITY		BEACH		STATE	FLORIDA	ZIP 32176
NAME						
ADDRESS		-				
CITY			• · · · · · · · · · · · · · · · · · · ·	STATE	. 17	ZIP
NAME						
ADDRESS						
CITY				STATE	S	ZIP
		ARTIC	CLE VIII - INC	CORPORAT	ORS	
he names	and addresses of the	e incorporators signi	ng these Article	s of Incorpo	ration are as follows:	
NAME	STERN	15N W	HALL			
NAME ADDRESS		POVAL		CR		
ADDRESS	182	ROYAL	DUNES			ZIP 32/76
ADDRESS		ROYAL			FLORIDA	ZIP 32/76
ADDRESS	182 ORMOND	ROYAL	DUNES			ZIP 32/76
ADDRESS CITY (182 ORMOND	ROYAL	DUNES			ZIP 32/76 ZIP
ADDRESS CITY (NAME ADDRESS	182 ORMOND	ROYAL	DUNES	STATE		
ADDRESS CITY ADDRESS CITY	182 ORMOND	ROYAL	DUNES	STATE		
ADDRESS CITY ADDRESS CITY NAME	182 ORMOND	ROYAL	DUNES	STATE		
ADDRESS CITY NAME ADDRESS CITY NAME ADDRESS CITY	182 ORMOND	ROYAL BEACH	DUNES	STATE STATE	FLORIDA	ZIP
ADDRESS CITY NAME ADDRESS CITY NAME ADDRESS CITY	182 ORMOND	ROYAL BEACH or(s) have executed	DUNES these Article	STATE STATE STATE s of Incorp	FLORIDA	ZIP
ADDRESS CITY NAME ADDRESS CITY NAME ADDRESS CITY	182 ORMOND	ROYAL BEACH or(s) have executed	DUNES these Article	STATE STATE	FLORIDA	ZIP
ADDRESS CITY NAME ADDRESS CITY NAME ADDRESS CITY	182 ORMOND	ROYAL BEACH or(s) have executed	DUNES these Article	STATE STATE STATE s of Incorp	FLORIDA	ZIP
ADDRESS CITY NAME ADDRESS CITY NAME ADDRESS CITY	182 ORMOND	ROYAL BEACH or(s) have executed	DUNES these Article	STATE STATE STATE s of Incorp	FLORIDA	ZIP ZIP TH

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

MORTGAGE PRO INC (name of corporation)	SECRETARY OF STATE	98 AUG 27 PH 4: 55	
---	--------------------	--------------------	--

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at	115	MASON	AVE		
	DAYTONA	BEACH	, FL,	32117	
has nan	ned S	TEPHEN	/ W.	HALL	 .

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.

