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LOCAL REPRESENTATIVE TALLAHASSEE

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-03/11/99--01050--013  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. CITI WIDE MORTGAGE AND INVESTMENTS  
(Corporation Name) (Document #)

2. CORP.  
(Corporation Name) (Document #)

3.

(Corporation Name)

(Document #)

4.

(Corporation Name)

(Document #)



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NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

RECEIVED  
99 MAR 11 AM 11:07  
DIVISION OF CORPORATION

Examiner's Initials

**ARTICLES OF INCORPORATION**  
**OF**  
**CITIWIDE MORTGAGE AND INVESTMENTS CORP.**

99 MAR 11 PM 12:44  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

**ARTICLE I - NAME**

The name of the corporation shall be:

Citiwide Mortgage and Investments Corp.

The principal place of business of this corporation shall be:

20335 West Country Club Drive, Suite #2309  
Aventura, Florida 33180

**ARTICLE II - NATURE OF BUSINESS**

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

**ARTICLE III - CAPITAL STOCK**

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is:

ONE THOUSAND SHARES with a \$1.00 par value.

**ARTICLE IV - TERM OF EXISTENCE**

This corporation is to exist perpetually.

**ARTICLE V - OFFICERS DIRECTORS**

The name(s) and street address(es) of initial officer(s) and directors(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is (are):

Ezequiel Sar-Shalom  
20335 West Country Club Drive, Suite #2309  
Aventura, Florida 33180

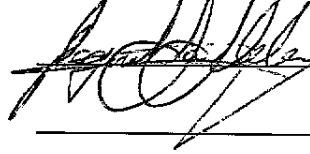
**ARTICLE VI - INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to these articles of incorporation is (are):

Ezequiel Sar-Shalom  
20335 West Country Club Drive, Suite #2309  
Aventura, Florida 33180

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this 10<sup>th</sup> day of March 1999.

Signature(s) of Incorporator(s)

  
\_\_\_\_\_  
\_\_\_\_\_

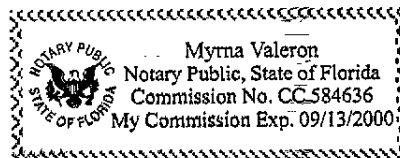
STATE OF FLORIDA  
COUNTY OF Dade

THE FOREGOING instrument was acknowledged and sworn to before me this 10 day of  
March, 1999, by Ezequiel Ser Shalom  
(Incorporator's name)  
of Citiwide Mortgage and Investment Corp.  
(Name of Corporation)

Myra Valeron  
Notary Public

(SEAL)

My Commission Expires: 09/13/2000



**CERTIFICATE DESIGNATION**

**REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: Citiwide Mortgage and Investments Corp.
2. The name and address of the registered agent and office is:

Ezequiel Sar-Shalom  
20335 West Country Club Drive, Suite #2309  
Aventura, Florida 33180

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND IF FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

  
SIGNATURE

3/10/99  
DATE

**FILED**  
99 MAR 11 PM 12:44  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA