

OFFICE USE ONLY (Document #)

IZARUS CORPORATE FILING SERVICE, INC.

(Requestor's Name)

3320 S.W. 87th AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

OFFICE USE ONLY

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

1. ALPHA INT'L MORTGAGE LENDER CORP.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

RECEIVED

99 MAY 27 AM 10:49

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Walk in

Pick up time

2:00

Mail out

Will wait

☐ Photocopy

☒ Certified Copy

☐ Certificate of Status

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 MAY 27 PM 12:54

FILED

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

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-05/27/99-01047-011

*****78.75 *****78.75

Examiner's Initials

FILED

99 MAY 27 PM 12:54

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

ALPHA INT'L MORTGAGE LENDER CORP

ARTICLE II PRINCIPAL OFFICE

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

13500-13550 N. KENDALL DR. #225
MIAMI, FL. 33186

ARTICLE III SHARES

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

100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

HECTOR S. GARCIA
10950 SW 57 TER
MIAMI, FL 33173

ARTICLE V INCORPORATOR(S)

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

Hector S. Garcia,
10950 SW 57 Ter.
Miami, FL 33173.

ARTICLE VI DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is(are):

Hector S. Garcia,
10950 SW 57 Ter.
Miami, FL 33173.

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 26 day of MAY, 1999.



Signature

Signature

Signature

Articles of Incorporation
Filing Fee - \$35

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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: ALPHA INT'L MORTGAGE LENDER
2. The name and address of the registered agent and office is:
HECTOR S GARCIA
(NAME)
10950 SW 57 TERR.
(P.O. BOX NOT ACCEPTABLE)
MIAMI FL 33173
(CITY/STATE/ZIP)

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

DATE

[Handwritten Signature]

5/26/99

99 MAY 27 PM 12:54
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

REGISTERED AGENT FILING FEE: \$35.00