

TRANSMITTAL LETTER

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

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-06/01/99-01028-001
*****78.75 *****78.75

SUBJECT: FIRST NATIONAL FINANCE CORPORATION of South Florida
(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 of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Luigia Sorriento-Lesniewski
Name (Printed or typed)

315 CROSSWINDS DR.
Address

PAIM HARBOR, FL 34683
City, State & Zip

(727) 943-8803
Daytime Telephone number

99 JUN -1 AM 11:46
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

T. SMITH JUN 04 1999

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: FIRST NATIONAL FINANCE CORPORATION of South Florida

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 315 CROSSWINDS DRIVE
PALM HARBOR, FL 34683

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 7500 SHARES
of 1 PAR VALUE common stock

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: Luigia Sorriento-Lesniewski
315 CROSSWINDS DRIVE
PALM HARBOR, FL 34683

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:
Luigia Sorriento-Lesniewski
315 CROSSWINDS DRIVE
PALM HARBOR, FL 34683

Luigia Sorriento-Lesniewski
Signature/Incorporator

5/28/99
Date

(An additional article must be added if an effective date is requested.)

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

Luigia Sorriento-Lesniewski
Signature/Registered Agent

5/28/99
Date

99 JUN 14 AM 11:46
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA