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Transmittal Letter

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

SUBJECT:	The Mort	gage Money Cent	er Inc.	
	(Proposed corpora	te name - must include su	ffix)	
Enclosed is an origi		he articles of incorporation	•	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing fee & Certified Copy	\$131.25 Filing fee, Certified Copy, & Certificate	
		Additional Copy Required		
,		800	000292374	
FROM:	Barbara Han	sen	- ~U (/U6/3301 10)	<u> </u>
Name (printed or	typed)	# 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	******78.75 ***	**78.75
		winds Dr. #414		
Address				
City, State & Zip	Ft. Myers,	FL 3390/	· · · · · · · · · · · · · · · · · · ·	. y * <u> </u>
ony, state & Zip	041 070 5			
Daytime Telephone	941-278-58 Number	<u> 37,1 . ,</u>	<u>and the state</u>	金 () () () () () () () () () (
	- 110111DQ			
Note: Please provi	de the original and <i>one co</i>	opy of the articles.		

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

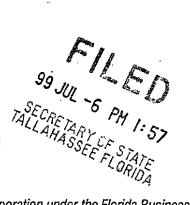
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ALERT

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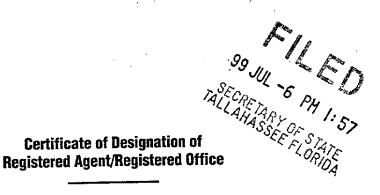
THE FOLLOWING PAGE



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:
The Mortgage Money Center Inc.
,
ARTICLE II: PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:
5625 Trailwinds Dr. #414
Ft. Myers FL.33907
ARTIOLE III. CHAREC
ARTICLE III: SHARES
The number of shares of stock that this corporation is authorized to have outstanding at any
one time is: 1000
,
ARTIGIP III. MITTIAL REGISTERED ASPLIT AND STREET ARRESS
ARTICLE IV: INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:
Barbara Hansen
5625 Trailwinds Dr. #414
Ft. Myers, FL 33907
ASTIGLE V. WOODDONIED LOOK
ARTICLE V: INCORPORATOR(S)
See instructions for officers/directors.
The name(s) and street addresses of the incorporator(s) to these Articles of Incorporation is
(are):
Barbara Hansen
5625 Trailwinds Dr. #414
Ft Myore FT 33007



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 DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: The Mortgage Money Center Inc.	
2. The name and address of the registered agent and office is:	
Barbara Hansen (Name)	- ' -
5625 Trailwinds Dr. #414 (P.O. Box or Mail Drop Box NOT Acceptable)	
Ft. Myers, FL. 33907 (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.

Kaile and Housen

6-29-99

(Signature)

(Date)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314