P990000 8304

TRANSMITTAL LETTER

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32214

300002986413--- 6 -09/14/99--01010--014 *****78.75 ******78.75

SUBJECT:

South Atlantic Mortgage Associates, Inc.

Enclosed is an original and one(1) copy of articles of incorporation and a check for:

[] \$70.00

[X] \$78.75

[]\$122.50

[]\$131.25

Filing Fee

Filling Fee

Filing Fee

Filing Fee, Certified Copy

& Certificate

& Certified Copy *

& Certificate *

ADDITIONAL COPY REQUIRED

FROM:

Ronald Lovell

Compliance Consulting Corporation of Florida

407 S. Dixie Hwy., Suite 5 Lake Worth, FL 33460

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

Articles of Incorporation

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:

South Atlantic Mortgage Associates, Inc.

ARTICLE II

PRINCIPLE OFFICE

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

13731 North Nebraska Ave Tampa, FL 33612

ARTICLE III

SHARES

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

200

ARTICLE IV

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent is:

Jimi Albert Barfield 13731 North Nebraska Ave Tampa, FL 33612

ARTICLE V

INITIAL DIRECTORS NAME AND ADDRESS

Jimi Albert Barfield 13731 North Nebraska Ave Tampa, FL 33612

ARTICLE VI

INCORPORATOR

The name and address of the Incorporator to these Articles of Incorporation are:

Jimi Albert Barfield, Director 13731 North Nebraska Ave Tampa, FL 33612

Signature/Incorporate

Date

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/Registered Ager

Date