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Department of State				
Division of Corporations	·- ·· ·· ·· · · · · · · · · · · · · · ·		-	
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Tallahassee, FL 32314		-09/27/990:		
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SUBJECT: Foreclosed Homes of Meroposed corporate (Proposed corporate)	prate name - must include suffi	ix)	- 1 -	= . ,:
(Troposou voi)		•		
Enclosed is an original and one(1) copy of the artic	les of incorporation and a	check for:		
\$70.00 \$78.75	- □\$78.75	\$87.50		
Filing Fee Filing Fee	Filing Fee	Filing Fee,		
& Certificate of Status	& Certified Copy	Certified Copy		
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	ADDITIONAL CO	PY REQUIRED		
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FROM: Foreclosed Homes Name (Printed or typed)	P. S.	(********	ži.
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10745 S.W. 104 st	Address		<u>.</u>	-
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Miami,Fl. 33176	A 201	24 8		
Cit	y, State & Zip	S _{tri})		
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NOTE: Please provide the original and one copy of the articles.

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ARTICLI	ES OE	INCORP	ORATIO	ON
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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:

FORECLOSED HOMES OF MIAMI, INC.

ARTICLE II PRINCIPAL OFFICE

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

10745 S.W. 104 st Miami, F1. 33176

ARTICLE III SHARES

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

10

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Mark Tenzer

10745 S.W. 104 st

Miami,F1. 33176

ARTICLE V INCORPORATOR

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

Mark Tenzer

10745 S.W. 104 st

Miami, F1. 33176

Signature/Incorporator

7-24-99

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

Signature/Registered/Agent

Date