

F04000004211

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

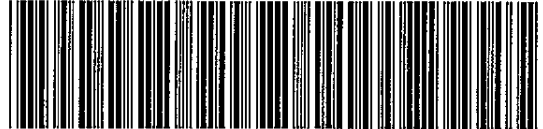
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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100037973461

07/20/04--01054--001 **78.75

FILED
04 JUL 20 PM 4:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
07 JUL 20 11:15
DATE
FILED
TALLAHASSEE, FLORIDA

BK

CORP DIRECT AGENTS, INC. (formerly CCRS)
103 N. MERIDIAN STREET, LOWER LEVEL
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: ED
DATE: 07/20/04
REF. #: RA0589.28262
CORP. NAME: OWN A HOME INCORPORATION

FILED
04 JUL 20 PM 4:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- | | | |
|---|---|--|
| ☐ ARTICLES OF INCORPORATION | ☐ ARTICLES OF AMENDMENT | ☐ ARTICLES OF DISSOLUTION |
| ☐ ANNUAL REPORT | ☐ TRADEMARK/SERVICE MARK | ☐ FICTITIOUS NAME |
| ☒ FOREIGN QUALIFICATION | ☐ LIMITED PARTNERSHIP | ☐ LIMITED LIABILITY |
| ☐ REINSTATEMENT | ☐ MERGER | ☐ WITHDRAWAL |
| ☐ CERTIFICATE OF CANCELLATION | | |
| ☐ OTHER: | | |

STATE FEES PREPAID WITH CHECK# 1944 FOR \$ 78.75

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ **COST LIMIT: \$** _____

PLEASE RETURN:

- | | | |
|--|---|---|
| ☒ CERTIFIED COPY | ☐ CERTIFICATE OF GOOD STANDING | ☐ PLAIN STAMPED COPY |
| ☐ CERTIFICATE OF STATUS | | |

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

July 20, 2004

CORPDIRECT AGENTS

TALLAHASSEE, FL

SUBJECT: OWN A HOME INCORPORATION
Ref. Number: W04000027797

FILED
04 JUL 20 PM 4:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
PLEASE GIVE ORIGINAL SUBMISSION
DATE AS FILE DATE.

We have received your document for OWN A HOME INCORPORATION and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$78.75 payment.

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr
Document Specialist

Letter Number: 904A00045975

PLEASE GIVE ORIGINAL SUBMISSION
DATE AS FILE DATE.

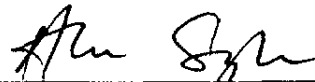
RECEIVED
04 JUL 22 PM 2:41
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

RESOLUTION OF BOARD OF DIRECTORS

I, the undersigned ALAN B. SINGH, do hereby certify
that this Resolution of the Board of Directors of DWN A HOME INC,
a corporation duly organized and existing under the laws of the State of NEW YORK,
was duly adopted on APRIL 11, ~~20~~ 1991.

Resolved, that DWN A HOME INC., organized
and existing in the State of NEW YORK, hereby adopts the
name DWN A FLORIDA HOME INC. for use in Florida.

Dated: 7-20-04



Signature of at least one director

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

FILED
JUL 20 PM 4:11
TALLAHASSEE, FLORIDA

1. Own A Home Incorporation

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

OWN A FLORIDA HOME INC.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. New York State

(State or country under the law of which it is incorporated)

3. 11-3056846

(FEI number, if applicable)

4. April 11, 1991

(Date of incorporation)

5. None

(Duration: Year corp. will cease to exist or "perpetual")

6. None

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 117-05 115 Ave S. Ozone Park NY 11420

(Principal office address)

117-05 115 Ave S. Ozone Park NY 11420

(Current mailing address)

8. Full Serve Real Estate Company

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CorpDirect Agents Inc.

Office Address: 103 N. Meridian Ave

Tallahassee FL

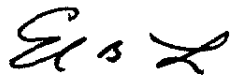
(City)

, Florida 32301

(Zip code)

10. **Registered agent's acceptance:**

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



Ed Lary (Registered agent's signature) Asst. Secretary

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Alan B Singh

Address: 117-05 115 Ave

S. Ozone Park NY 11420

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Alan Brijanand Singh

Address: 117-05 115 Ave

S. Ozone Park NY 11420

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____

(Signature of Director or Officer listed in number 12 of the application)

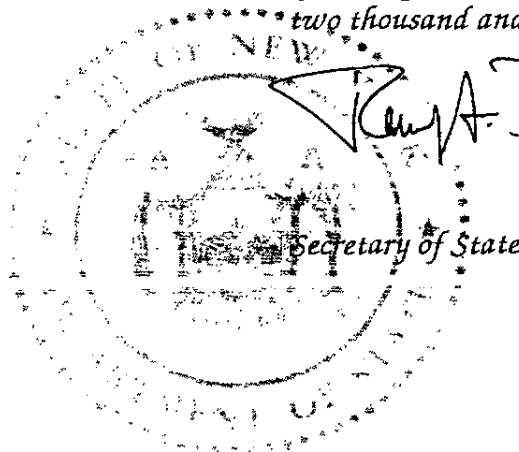
14. _____

(Typed or printed name and capacity of person signing application)

**State of New York } ss:
Department of State**

I hereby certify, that the Certificate of Incorporation of OWN A HOME INCORPORATION was filed on 04/11/1991, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 07th day of July
two thousand and four.*



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