Florida Department of State

Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H060000245153)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0381

PLEASE GIVE ORIGINAL SUBMISSION

DATE AS FILE DATE.

From:

Account Name : CORPDIRECT AGENTS, INC.

Account Number : 110450000714 Phone : (850)222-1173

Fax Number : (850)224-1640

01448.47343

FOREIGN PROFIT/NONPROFIT CORPORATION

ALL AMERICAN MORTGAGE CORPORATION

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

PLEASE GIVE ORIGINAL SUBMISSION DATE AS FILE DATE.

i. Shirais FEB O 1 2006

01/27/2006 4:21:06 PM

850-205-0381

1/30/2006 3:11 PAGE 001/001 Florida Dept of State

January 30, 2006

CORPDIRECT AGENTS, INC.

SUBJECT: AAMC REF: W06000004527 FLORIDA DEPARTMENT OF STATE Division of Corporations

> PLEASE GIVE ORIGINAL SUBMISSION DATE AS FILE DATE.

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

If you have any further questions concerning your document, please call (850) 245-6955.

Suzanne Hawkes Document Specialist New Filing Section

FAX Aud. #: H06000024515 Letter Number: 206A00006596

PLEASE GIVE ORIGINAL SUBMISSION DATE AS FILE DATE

From: Tracy Spear

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.

t	Ali American	a Mortgage (Corporation		
	(Enter name of	Corporation:	must include "INCORPORATED," "COMPANY," "CORPORATION."		
	"Inc.," "Co.," '	"Corp," "Inc,"	Co," or "Corp.")		
		orporat			
	(If name unava	allable in Flor	ida, enter alternate corporate name adopted for the purpose of transacting business in Florid	a)	
2,	Illinois		3, 36-3835135		
(State or countr	y under the l	w of which it is incorporated) (FEI number, if applicable)		-
4.	06/01/1992		5. Perpetual		
	(Da	ate of incorpo		7	
6	Upon Qualific	cation			
			s in Florida. If corporation has not transacted business in Florida, insert "upon qualification	ī.") ə	
			(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	- E	8
7.	1355 South R	loute 59, Na	perville, 1L 60564	CR A	
-			(Principal office address)		MAL
	355 South R	oute 59. Na	perville, IL 60564	SS. SS.	12
-			(Current mailing address)	— M-<	,
			,	. P	7
8.	Mortgage Bro	okering			Ō
	(Purpose	(s) of corpor	ation authorized in home state or country to be carried out in state of Florida)	STATE LORIE	
9	Name and st	reef addres	of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	. ≥ 1⊓	S
- •	<u> </u>		· · · · · · · · · · · · · · · · · · ·		
	Name:	NRAI Servi	ces, Inc.		
Δñ	fire Address	2731 Exec	utive Park Drive, Suite 4		
U 1.	100 1 (00:23)				
		Weston	Florida 33331		
			(City) (Zîp code)		
10.	Registered	agent's acc	eptance:		
			stered agent and to accept service of process for the above stated corporation at th		
			n, I hereby accept the appointment as registered agent and agree to act in this cu,		
			the provisions of all statutes relative to the proper and complete performance of accept the obligations of my position as registered agent.	ту шинка,	
		{			
		NKALSE	rvices, Inc.		
		By:	rine Illa		
		0	(Registered agent's signature)		•
	1	Sabrina Tilli	enauch Asst. Secretary	iastian ta	
II.	Attached is	a certificate	of existence duly authenticated, not more than 90 days prior to delivery of this appl the Secretary of State or other official having custody of corporate records in the jun	ication to	
			ncorporated.		

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

A. DIRECTORS		
Chairman: Kenton R. Kooyen	ga	
Address: 1355 South Route 5	59	
Naperviile, IL 60564		
Vice Chairman:		•
		•
Address:		
		-
Director:	<u>}</u>	
Address:		
Director:		
Address:		
	, Na de la company de la comp	
-		
B. OFFICERS	HAT A	
President: Kenton R. Kooyen	ga System	-
Address: 1355 South Route 5		2
Naperville, IL 6056	4 T/A	* *
Vice President:	TAT OR	-
Address:	- 3m	Ö
Address.		-
Secretary:		
Address:		
Treasurer:		
Address:		
	•	
NOTE: If necessary, you ma	ay attach anyaddendum to the application listing additional officers and/or directors.	
13. Kentro	R Konga	
J	Director or Officer listed in number 12 of the application)	
14. Kenton R. Kooyenga, P	resident led or printed name and capacity of person signing application)	
(13)	the or britished theirs with advanced as bankan allients afternatures.	

To. Fl Dept. of State Subject: 001448.47343 From: Tracy Spear

Monday, January 30, 2006 4:55 PM Page: 5 of 6



1355 South Route 59 • Naperville, IL 60564 • Ph (630) 978-8300 • Fax (630) 978-8200

Division of Corporations
Florida Department of State
2661 Executive Center Circle West
Tallahassee, FL 32301

January 19, 2006

To whom it may concern:

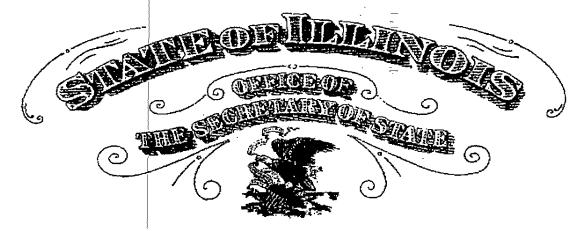
The following is a copy of a resolution adopted by the corporation in January, 2006 in association with transacting business in Florida under a fictitious name:

"RESOLVED, that, this corporation desires to transact business in the State of Florida, and the Officers and Directors have been advised that the name of this corporation is not available for use in the State of Florida, this corporation adopts the assumed name, "AAMC" for use in transacting business in the State of Florida."

Kenion R. Koovenga Secretar

File Number

5685-998-5



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this

day of JANUARY A.D.

2006

Printed by surhority of the State of Winels, May 2005 - 50M - C-250.2