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To:

Division of Corporations

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From:

Account Name

; BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

Account Number : 075350000353

Phone

: (212)431-5000

Fax Number

: (212)431-1441

ORIDA/FOREIGN LIMITED LIABILITY CO.

CUSTOMIZED MORTGAGE SOLUTIONS, LLC

Certificate of Status	0
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608:93, FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. CUSTOMIZED MORTBAGE SOLUTIONS, LLC (Name of Foreign Limited Liability Company) 2. NEW JERSEY (Jurisdiction under the law of which foreign limited liability company is organized) (FBI number, if applicable) 4, 6/22/2004 PERPETUAL (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") 6. UPON FILING OF THIS DOCUMENT (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. ONE DEWOLF ROAD, STE 209 9 OLD TAPPAN, NJ 07675 Y OF STATE CORPORATIONS (Street Address of Principal Office) 至 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: VICTOR M. POLCE, ONE DEWOLF ROAD, STE 209, OLD TAPPAN, NJ 07675 10. Attached is an original certificate of existence, no more than 90 days old, duty authorizated by the official having custody of records in the jurisdiction under the lew of which it is cryamized. (A photocopy is not ecceptable. If the certificate is in a foreign language, a .translation of the certificate under eath of the templator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: MORTGAGE LENDING

Typed or printed name of signee

VICTOR M. POLCE

Signature of a member or an authorized representative of a member. (In accordance with action 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the face rated herein are true.)

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

CUSTOMIZED MORTGAGE SOLUTIONS, LLC

2. The name and the Florida street address of the registered agent and office are:

BLUMBERGEXCELSIOR CORPORATE SERVICES, INC.

(Name

4435 OLD WINTER GARDEN ROAD

Florida Street Address (P.O. Box NOT ACCEPTABLE)

ORLANDO

··· 32811

City/State/Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company 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 etatytes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position at registered agent as provided for in Chapter 608, Florida Statutes.

. (Sjänspric)

JOSE MOJICA, ASST. SECY.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

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STATE OF NEW JERSEY DEPARTMENT OF TREASURY SHORT FORM STANDING

CUSTOMIZED MORTGAGE SOLUTIONS, LLC 0600206147

With the Previous or Alternate Name
CUSTOMIZED MORTGAGE SOLUTIONS (Alternate Name)
VICTOR M. POLCE CONSULTING, LLC (Previous Name)

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on June 22, 2004.

As of the date of this certificate, said business continues as an active business in the State of New Jersey. Annual Reports are outstanding for the following year(s):

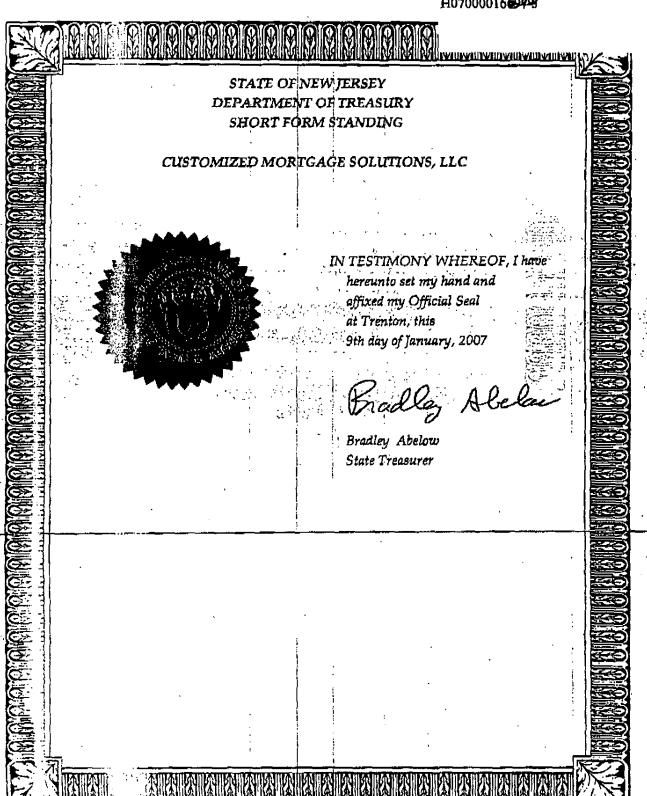
2005 2006

I further certify that the registered agent and registered office are:

Victor M. Polce 239 Old Tappan Road Old Tappan, NJ 07675

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