To: Qualification/Tay Lien Section Division of Corporations

	(Name of corpor	ration - must include suffix)	<u> </u>
Dear Sir or Madan			
	lication by Foreign Corporation stence", and check are submitted in Florida.		
Please return all co	rrespondence concerning this ma	atter to the following:	
	JOEL C	TOTHELF	
	(Name	e of Person)	
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_	HPP CE IV COY	Company)	
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_	750 N- C	DRUCANS # 101A	<u> </u>
	(A	Address)	
	CHECAGO	IL 60610	· [v99-1
	(City/	/State/Zip)	
Should you need to	call someone concerning this ma	atter, please call:	
<u>೨೦೯८ (೨೮</u> (Name of	$\frac{\nabla \sqrt{\text{CLF}}}{\text{Domon}} \text{ at } (3)$	2) 932-2300 rea Code & Daytime Telephone	Name of A
(Name or	reison) (Ar	ea Code & Dayume Telephone	Number 6
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	SS•	MAILING ADDRESS.	<u> </u>
STREET ADDRI	SS:	MAILING ADDRESS:	
STREET ADDRI	Lien Section	Qualification/Tax Lien Sec	SEE FLO
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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 1, 1999

JOEL GOTHELF APPLE MORTGAGE, INC. 750 N. ORLEANS #101-A CHICAGO, IL 60610

SUBJECT: APPLE MORTGAGE, INC.

Ref. Number: W99000012708

We have received your document for APPLE MORTGAGE, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

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) 487-6958.

Letter Number: 999A00029824

Lee Rivers Document Specialist

CORPORATE RESOLUTION UNANIMOUS CONSENT TO ACTION OF BOARD OF DIRECTORS OF APPLE MORTGAGE, INC.

The undersigned, constituting the entire Board of Directors of Apple Mortgage Inc., an Illinois corporation, do hereby consent to the following action as of this date, without meeting and without notice:

RESOLVED FIRST, that the following individuals occupying the officers beside their respective names:

Stuart Edward Urkov - President Joel Gothelf - Vice President Jon Crumlish - Vice President

or any one or more of them or their duly elected or appointed successors in office, be and each of them is hereby authorized and empowered in the name and on behalf of this corporation and under its corporation seal, have resolved that Apple Mortgage, Inc. an Illinois Corporation whose name is already in use as a legal corporation in the State of Florida, will do business as Pinetree Mortgage, Inc. in the State of Florida.

Date as of the 25th day of May, 1999

Apple Mortgage, Inc.

President

e-President

Vice-President

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.
None Manager To
1. APPLE MONTGAGE, INC.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or
words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a
natural person or partnership if not so contained in the name at present.)
3 36-3939283
2. The law of which it is incorporated) (State or country under the law of which it is incorporated) (FEI number, if applicable)
4. Z-ZY-94 5. 1000 YEARS (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 750 N. ORLEANS #101A
CATCAGO IL 60610
(Current mailing address)
8. ANY AND AU PURPOSES FOR WHICH A CORPORATION MAY BE LAWRILLY DREAMTZED
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
UNDER THE THEROOPS BUSTNESS COMPONATIONS ACT.
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
9. Name and street address of Fiorida registered agents (1.5. 25% of 1.5. 25%
Name: MECHAEC M. LESTECK
ace the E. ATLANTIC AVE.
Name: MECHAEC M. LESTECK Office Address: 616 E. ATLANTEC AVE. 33483
Office Address: 616 E. ATLANTIC AVE. 33483 DEL RAY BEALL TFlorida, TFlorida,
(Zip code)
(Zip code)
10. Registered agent's acceptance:
and the second s
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.
Mukoel M. Kentul
(Registered agent's signature) MICHAFI MIISTICK

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.

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)	
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS (Street address only - P.O. Box NOT acceptable)	
President: STUART VRKOV	
Address: 750 N. ORLEANS #101A	
CHECAGO IL 60610	
Vice President: JOEL GOTHELF	99 1AT 1AT
Address:750 N. ORLEANJ #101A	CARE LA TO
CHEVAGO IL 60610	ASS.
Secretary: JON CRUMLISH	
Address: 750 N. ORLEANS #101A	RECEIVED
	►
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional of	ficers and/or directors
$\bigcap_{i \in \mathcal{A}} A_i$	
13. (Signature of Chairman, Vice Chairman, or any officer listed in number 1	
14. Some GOTHEF VICE PRESIDE (Typed or printed name and capacity of person signing	nT.
(Typed or printed name and capacity of person signing	application)

File Number _____ 5769-557-9



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do

hereby certify that Apple Mortgage, Inc., a domestic corporation, incorporated under the Laws of this state february 24, 1994, appears to have complied with all the provisions of the Business corporation act of this state relating to the filing of annual reports and payment of franchise taxes, and as of this date, is in good standing as a domestic corporation in the state of intenders***

CREAKEE FLORIDA

In Testimony Whereof, I, hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this ______ A.D. ______.



