

F000000000226

TRANSMITTAL LETTER

To: Registration Section  
Division of Corporations

SUBJECT: MONEY SOLUTIONS, INC.  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida",  
"Certificate of Existence", and check are submitted to register the above referenced foreign corporation to  
transact business in Florida.

Please return all correspondence concerning this matter to the following:

300003075163--7

-12/20/99--01085--007

\*\*\*\*\*70.00 \*\*\*\*\*70.00

ROBERT RAMPOLLA

(Name of Person)

MONEY SOLUTIONS, INC.

(Firm/Company)

421 KINSLEY CT.

(Address)

OCEANSIDE NY 11572

(City/State/Zip)

Should you need to call someone concerning this matter, please call:

ROBERT RAMPOLLA

(Name of Person)

at (516) 6782855

(Area Code & Daytime Telephone Number)

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

WMA 2/9/99  
00759/00524/000671

FB00

RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL 32314  
JAN 19 1999 8:51



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

December 23, 1999

ROBERT RAMPOLLA  
MONEY SOLUTIONS, INC.  
421 KINSLEY CT.  
OCEANSIDE, NY 11572

SUBJECT: MONEY SOLUTIONS INCORPORATED  
Ref. Number: W99000029149

We have received your document for MONEY SOLUTIONS INCORPORATED and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name on the certificate of status must match the name listed on line one of the foreign qualification application.

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) 487-6025.

Trevor Brumbley  
Document Specialist

Letter Number: 199A00059854

RECEIVED  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA  
1999 DEC 23 11 08 AM

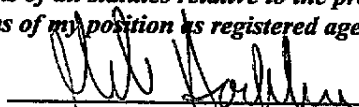
**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*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.*

1. MONEY SOLUTIONS, 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.)
2. New York 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 5/03/99 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. UPON QUALIFICATION  
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. a. 421 Kinsley Ct. OCEANSIDE NY 11572  
(Principal office address)  
b. SAME.  
(Current mailing address)
8. MORTGAGE BROKER  
(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 or Mail Drop Box **NOT** acceptable)  
Name: Mel Hochberg  
Office Address: 11776 CASTELLON CT.  
Boynton Beach, FL 33437, Florida 33437  
(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.*

  
(Registered agent's signature)

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:

ROBERT RAMPOLLA

Address:

421 Kinsley Ct. Oceanside NY 11572

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

N/A

B. OFFICERS

President:

Address:

Vice President:

Address:

Secretary:

Address:

Treasurer:

Address:

N/A

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SECRET  
MAIL ROOM  
FBI

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

13.

Robert Rampolla

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14.

ROBERT RAMPOLLA Chairman

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

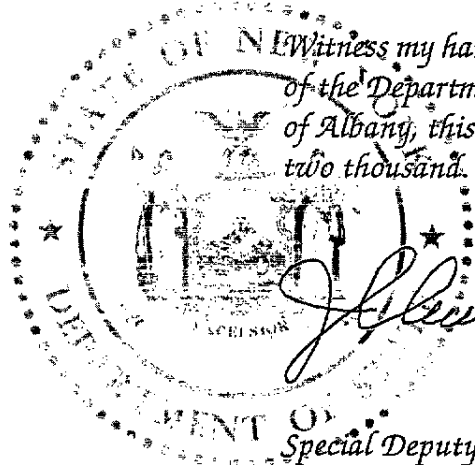
State of New York } ss:  
Department of State

I hereby certify, that the certificate of incorporation of MONEY SOLUTIONS, INC. was filed on 05/03/1999, under the name of CAPITAL FUNDING ASSOCIATES, INC., with perpetual duration, and that a diligent examination has been made of the index of corporation papers filed in 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.

A Certificate of Amendment CAPITAL FUNDING ASSOCIATES, INC., changing name to MONEY SOLUTIONS, INC., was filed 11/08/1999.

\*\*\*

Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 03rd day of January  
two thousand.



*[Signature]*  
Special Deputy Secretary of State

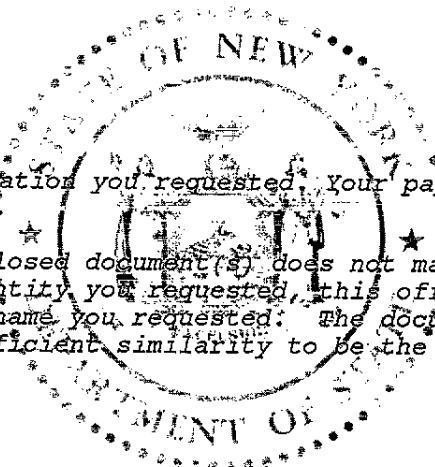
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001013 210-51  
JAN 03 2000  
STATE OF NEW YORK  
DEPARTMENT OF STATE

ROBERT RAMPOLLA  
421 KINSLEY CT.  
OCEANSIDE NY 11572

Enclosed is the information you requested. Your payment of \$50.00 is hereby acknowledged.

If the name on the enclosed document(s) does not match exactly with the name of the entity you requested, this office does not have a record of the exact name you requested. The document(s) provided appear(s) to be of sufficient similarity to be the entity requested.



00 JAN 13 AM 8:51  
STATE OF NEW YORK  
TAXATION AND FINANCE