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ACCOUNT NO.

072100000032

REFERENCE :

608256

7146642

100003159661--1

AUTHORIZATION

ORDER DATE :

March **b**, 2000

ORDER TIME : 4:30 PM

ORDER NO. : 608256-010

CUSTOMER NO: 7146642

CUSTOMER: Ms. Adrienne Shaffer

Michael Harris, P.a.

Suite 550

1645 Palm Beach Lakes Blvd. West Palm Beach, FL 33401

FOREIGN FILINGS

NAME: HEARTLAND SECURITIES CORP.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

___CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Erika Carlson

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

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. Heartland Securities Corp. (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.) New Jersey (State or country under the law of which it is incorporated) (FEI number, if applicable) February 1, 1998 (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) 800 Brickell Avenue, Suite 701 Miami, Florida 33131 (Current mailing address) Securities broker - dealer 8. (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) Michael D. Harris, Esquire Name: 1645 Palm Beach Lakes Boulevard Office Address: West Palm Beach 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-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

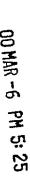
12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

which it is incorporated.

Chairma		<u> </u>
Address:	00 H R	<u> </u>
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Vice Cha	rman:	
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-		20
Director:	Lee Maschler	<u> </u>
	50 Broad Street, 15th Floor	
	New York, NY 10004	
Director:	Matthew Maschler	<u> </u>
Address:	187 Route 34	
	Matawan, NJ 07747	
B. OFFI	CERS (Street address only - P.O. Box NOT acceptable)	 ·
President:	Erik Maschler	
Address: ,	100 Wood Avenue South	''''
•	132111, NO 08830	
Vice Presid	lent:	
		_ ,
Secretary:	Aaron Elbugen	<u> </u>
	1650 49th Street	
	Brooklyn, NY 11204	
torteres	Michael McCarty	_
Address: _	100 Wood Avenue South	
	Iselin, NJ 08830	_,
NOTE: 1	necessary, you may attach an addendum to the application listing additional officers and/or directors.	
13:	and of the application using summond of the clork	-
13:	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	•

Address: ___ Vice Chairman: Address: ___ Director: Lee Maschler Address: 50 Broad Street, 15th Floor New York, NY 10004 Director: Matthew Maschler Address: _187 Route 34 Matawan, NJ 07747 B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: Erik Maschler Address: _100 Wood Avenue South Iselin, NJ 08830 Vice President: Address: _ Secretary: Aaron Elbugen Address: 1650 49th Street Brooklyn, NY 11204 Director Freamer: Michael McCarty Address: 100 Wood Avenue South Iselin, NJ 08830 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) (Typed or printed name and capacity of person signing application)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)



STATE OF NEW JERSEY DEPARTMENT OF TREASURY SHORT FORM STANDING

HEARTLAND SECURITIES CORP.
With the Previous or Alternate Name
DATEK ONLINE CORP.

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on April 4, 1997.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

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

Michael Mccarty 100 Wood Ave South 4/F Iselin, NJ 08830

Continued on next page . . .

