LOOQUOQO 1388

To: Qualification/Tax Lien Section Division of Corporations

SUBJECT:	FIRST CAPITAL MORTGAGE C	ORP.	
	(Name of corporation	on - must include suffix)	
Dear Sir or Mada	m:		
The enclosed "Ag" "Certificate of Exto transact business	oplication by Foreign Corporation for distence", and check are submitted to	Authorization to Transact Bu register the above referenced	siness in Florida", foreign corporation
w transact ousing	ss in Florida.	et site	00031319441
Please return all	correspondence concerning this matter	r to the following:	-02/10/0001116017 *****70.00 *****70.00
_	Michelle C. Otis, Esqu		
	(Name of	Person)	
_	PETER M. SCHNEIDERMAN		•
	(Firm/Co	mpany)	
	30300 Northwestern Hig	hway, Suite 222	
_	(Addı	ress)	·
_	Farmington Hills, Mich	igan 48334	
	(City/Sta	te/Zip)	
		, t	101
Should you need	to call someone concerning this matte	r, please call:	
Michelle C) 539-7400	
(Name o	Person) (Area (Code & Daytime Telephone N	
STREET ADDR	ESS:	MAILING ADDRESS:	15 PM ASSEE, F
Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399		Qualification/Tax Lien Sect Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	ion STATE LORIDA
Enclosed is a chec	k for the following amount:		
🕱 \$70.00 Filing F	Gee	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 17, 2000

MICHELLE C. OTIS, ESQ. PETER M. SCHNEIDERMAN & ASSOCIATES, P.C. 30300 NORTHWESTERN HWY SUITE 222 FARMINGTON HILLS, MI 48334

SUBJECT: FIRST CAPITAL MORTGAGE CORP.

Ref. Number: W00000004363

We have received your document for FIRST CAPITAL MORTGAGE CORP. and your check(s) totaling \$70.00. 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.

A photocopy of the certificate of existence is not acceptable.

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) 487-6043.

Shawn Logan Document Specialist

Letter Number: 600A000085

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FILED

CERTIFICATE OF RESOLUTION

This is to certify that at a special meeting of the Officers, Directors and Shareholders of First Capital Mortgage Corp, an Corporation organized under the laws of the State of Illinois, held at the office of said Corporation in the City of Chicago, County of Cook, State of Illinois on the 28th day of February, 2000, the following resolution was duly and legally presented and adopted by majority vote of said Officers, Directors and Shareholders; to wit:

It being the desire and purpose of the Officers, Directors and Shareholders of First Capital Mortgage Corp. that the Corporation be allowed to do business in the State of Florida and to use the name "First Capital Mortgage Corp. of Chicago"

BEIT RESOLVED, that Michael Goldhirsh as President of this Corporation, and in his official capacity be, and is hereby authorized and directed to prepare, execute, verify and present to the proper state authorities of the State of Florida, and for and on behalf of said First Capital Mortgage Corp., written application to the use of the name "First Capital Mortgage Corp. of Chicago as hereinbefore stated."

MICHAEL GOLDHIRSH, President Director and Shareholder

Dated: 22800

DAVID GOLDHIRSH, Vice President, Director and Shareholder

Dated: a laslop

SAM BOREK, Chairman of the Board and

Shareholder

Dated: 3 38 02

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.	FIRST CAP	ITAL MORTGAG	E CORP.				
1	Name of corporation: must include the words or abbreviations of like import in lateral person or parmership if not so con	nguage as will clea	riv indicate	MPANY", "CORPORATION that it is a corporation instead	of a		
2	Illinois		2	36-4290427			
(late or country under the law of which it	is incorporated)	-2	(FEI number, if applica	ble)		
4.	April 20, 1999	5		Perpetual			
-	(Date of incorporation)		uration: Ye	or corp. will cease to exist or	'perpental")		
6	Up	on approval					
	(Date first transacted business in Flo			01. 607.1502 and 817.155, F.	\$.)		
7	935 West C	hestunt, Su	ite 600				
_	Chicago, I						
	(C	urent mailing add	tess)				
8	Mortgage L	ender					
	(Purpose(s) of corporation authorized	in home state or c	ountry to be	carried out in state of Florida	1)	_	
	name and street address of Florida r Name: <u>Jeffrey Perlow,</u> Address: <u>20801 Biscayne B</u>	Esquire		t of Wari Duob Rox WO I s	(cceptable)		
	Aventura	<u> </u>		rida_ 33180			
			,	(Zip code)			
10. 1	legistered agent's acceptance:						
with i the ol	g been named as registered agent and a polication, I bereby accept the appointm he provisions of all statutes relative to th ligations of my position as registered ag	ent as registered a se proper and comp ent.	gent and ag please perform	ree to act in this capacity. I mance of my duties, and I an	further arree to	coma	h
				IEFFREY PERLOW			
nebat	tached is a certificate of existence duly a ment of State, by the Secretary of State o it is incorporated.	uthenticated, not m r other official hav	iore than 90 ing custody	days prior to delivery of this of corporate records in the ju	application of the restriction of the TARY	DOMAR 15	一
.2. N	unes and addresses of officers and/or dire	ctors: (Street addr	RSS ONLY	- P.O. Box NOT acceptable)	OF STATE	PM 3: 12	ED

Chairman:	SAM BOREK	
	935 W. Chestnut, Suite 600	,
Vice Chairman:	MICHAEL A. GOLDHIRSH	
Address:	935 W. Chestnut, Suite 600	
<u></u>	Chicago, IL 60622	
Director:	DAVID S. GOLDHIRSH	
	935 W. Chestnut, Suite 600	
	Chicago, IL 60622	
Director:		
Address:		
B. OFFICERS (S	treet address only - P.O. Box NOT acceptable)	
President:	MICHAEL A. GOLDHIRSR	
Address:		
	Chicago, IL 60622	<u></u>
Vice President:	DAVID S. GOLDHIRSH	
Address:	935 W. Chestnut, Suite 600	
	Chicago, IL 60622	<u> </u>
Secretary:		ES 3
Address:		瑟万户
· · · · · · · · · · · · · · · · · · ·		SHO RE
Treasurer:		For si
Address:		- REF 72
NOTE: If necessary.	. you may attach an addendum to the application listing additional officers and/or directors	
3. (Sign	nature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	
4	MICHAEL A. GOLDHIRSH, President	
	(Typed or printed name and capacity of person signing application)	

File Number ______6045-450-7



To all to whom these Presents Shall Come, Greeting:

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



In Testimony Whereof, I, hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this ______ A.D. _____2000__.

Desse White