Greenfield Mortgage, Inc. 21 Headquarters Plaza 2nd F1. West Tower Morristown, NJ 07960 City/state/2fp ~ MJH Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): 700003412717---8 -10/03/00--01044--008 ******78.88* *****70.00 (Corporation Name) (Document #) (Corporation Name) (Document #) ☐ Walk in Pick up time Certified Copy ☐ Mail out Will wait ☐ Photocopy Certificate of Status **NEW FILINGS AMENDMENTS** ☐ Profit ☐ Amendment ☐ Not for Profit Resignation of R.A., Officer/Director ☐ Limited Liability ☐ Change of Registered Agent Domestication ☐ Dissolution/Withdrawal Other ☐ Merger OTHER FILINGS REGISTRATION/QUALIFICATION ☐ Annual Report ☐ Foreign ☐ Fictitious Name ☐ Limited Partnership Reinstatement Trademark Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

October 9, 2000

GREENFIELD MORTGAGE, INC. 21 HEADQUARTERS PLAZA 2ND FL., WEST TOWE MORRISTOWN, NJ 07960

SUBJECT: GREENFIELD MORTGAGE, INC.

Ref. Number: W00000024457

We have received your document for GREENFIELD MORTGAGE, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence, which usually consists of a single sheet of paper and clearly reflects the entity is avalid entity in its home state/country. You can obtain the certificate of existence from the same office that provided you with the certified copy.

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) 487-6967.

Letter Number: 400A00053348

Michelle Hodges Document Specialist

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

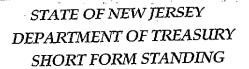
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

	eld Mortgage, Inc.					-
words or abbrev	oration; must include the word "INCORPO viations of like import in language as will or partnership if not so contained in the n	l clearly indic	ate that it is a corp	ORPORATION" or or oration instead of a		
		2	22-3643327			
2. <u>New Jer</u> (State or country	sey y under the law of which it is incorporate	3 :d)	(FEI nu	mber, if applicable)		<u>_</u> _
4(Dat	te of incorporation) 5.	perpartion:	Year corp. will c	ease to exist or "perpet	ual")	
6. Start (Date firs	up company t transacted business in Florida.) (SEE S	ECTIONS 60	7.1501, 607.1502	and 817.155, F.S.)		
7. <u>ZI Head</u>	<u>lquarters Plaza, Morristow</u>	n, New J	ersey 07960			-
	(Current mailin	g address)				•
8. Morts	gage Lending (s) of corporation authorized in home sta		to he corried out i	n state of Florida)		-
					8	ŽĮ.
9. Name and str	reet address of Florida registered a	agent: (P.O	. Box or Mail Dr	op Box NOT accept	00 0CT 30	1310 3%(C)
Name:	C T Corporation System .				<u>း</u> ရှိ . မ	로움 유럽士
			*	•		SAL
Office Address:	1200 South Pine Island Road			•	00 st Md	중위디
	Plantation		, Florida, <u>3332</u>	<u> </u>	F	SIA A
			(Zip coo	le)	00	<u> </u>
10 Registered	agent's acceptance:					S
Ü	-					
this application, I with the provision	teed as registered agent and to accept ser I hereby accept the appointment as regis is of all statutes relative to the proper an I my position as registered agent. C T Corporation System (Registered agent)	tered agent o nd complete p	and agree to act in performance of my	this capacity. I furth duties, and I am fam	er agree to c	comply
			747	HARLES W. MEYER SISTANT SECRETARY		
11. Attached is a Department of Sta	certificate of existence duly authenticated ate, by the Secretary of State or other offi	d, not more the	nan 90 days prior t ustody of corporat	o delivery of this applic e records in the jurisdic	cation to the	he law of

which it is incorporated.

^{12.} Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable) FL019 - 9/2/99 CT System Online

A. DIRECT	CORS (Street address only - P.O. Box NOT acceptable)
Chairman: _	J. BRIAN MORAN II
Address:	21 Headquarters Plaza, Morristown, New Jersey 07960
Vice Chairm	an:
Address:	
— Director: _	J. BRIAN MORAN II
Address:	Same as Above
— Director: _	
B. OFFIC	ERS (Street address only - P.O. Box NOT acceptable)
President: _	J. Brian Moran II
Address: _	Same as Above
Vice Preside	ent:
Address:	· · · · · · · · · · · · · · · · · · ·
Secretary:	
Address: _	
Treasurer:	
Address: _	
NOTE: If	necessary, you pasy attach an addendum to the application listing additional officers and/or directors.
13	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14	J. Brian Moran II; PRESIDENT (Typed or printed name and capacity of person signing application)



GREENFIELD MORTGAGE, INC.

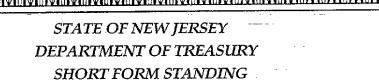
I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on March 10, 1999.

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.

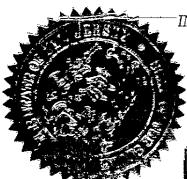
I further certify that the registered agent and registered office are:

J Brian Moran Ii 94c Lee'S Hill Road Basking Ridge, NJ 07920

Continued on next page . . .



GREENFIELD MORTGAGE, INC.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this

17th day of October, 2000

Rdand Immachail

Roland M Machold Treasurer