

ACCOUNT NO. : 072100000032

7230253 REFERENCE: 889479

AUTHORIZATION

COST LIMIT : \$ PREPAID

ORDER DATE: November 7, 2000

ORDER TIME : 10:45 AM

ORDER NO. : 889479-005

CUSTOMER NO:

7230253

CUSTOMER: Mr. Thad A. Davis

Chattelpaper Bd, Inc.

11th Floor

41 East 11th Street New York, NY 10003

CERTIFIED COPY

CONTACT PERSON: Darlene Ward -- EXT# 1135

EXAMINER:

*****87.50 *****87.50

FOREIGN FILINGS CHATTELPAPER BD, INC. NAME: XXXX QUALIFICATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFICATE OF GOOD STANDING

TRANSMITTAL LETTER

TO:	Registration Se			
	Division of Co	rporations		1 s 8
SUBJ	ECT:	Chatteli	enper BD, Ination - must include suffix	公 器 图 型
		(Name of corpor	ation - must include suffix)
Dear S	ir or Madam:			SERVICE PROPERTY.
"Certif	closed "Applica icate of Existence sact business in l	tion by Foreign Corporation ce", and check are submitted Florida.	for Authorization to Trans to register the above refere	act Business in Florida?, enced foreign corporation
Please	return all corresp	pondence concerning this ma	tter to the following:	
		That A.	Pavis Esa.	
		(Name	Davis, Esq.	· ·
		(Firm/	Company)	ChattelPaper BD, Inc.
	41 E	st IITH Str	est IITH	=/26=
		st //TH Str	ddress)	7001
	New	York New Yor	6 10003	
		York, New Yor (City/Sta	te and Zip code)	
		` •		
For fur	ther information	concerning this matter, pleas	se call:	
71	had Pav		2 <u>) 69</u> 9-3773	
	(Name of Perso	on) (Are	ea Code & Daytime Teleph	none Number)
Registr Divisio 409 E.	ET ADDRESS: ation Section n of Corporation Gaines St. ssee, FL 32399	s	MAILING ADDRES Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 3231	ons
Enclose	ed 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

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.							
	(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" of words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of						
	natural person or partnership if not so contained in the name at present.)						
_							
2.	(State or country under the law of which it is incorporated) 3. 52-22754// (FEI number, if applicable)						
4.							
	(Date of incorporation) 5. perpetua (Duration: Year corp. will cease to exist or "perpetual")						
	(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")						
	(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")						
(SEE SECTIONS 607.1301, 607.1302 and 817.133, F.S.)							
7. 100 Northwest 12TH Avenue; Dearfield Beach, Fla. 3344 (Principal office address) 41 East 11TH Street, 11TH Floor, NY, NY 10003 (Current mailing address)							
	(Principal office address)						
	41 East ITH Stock, ITH Floor NY, NY 10003						
	(Current mailing address)						
8.	NASD-registered broker-dealer						
	8. NASD-registered broker-dealer (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:CORPORATION SERVICE COMPANY						
	1201 Hays Street						
Of	fice Address:						
	m. 11.1						
	Tallahassee, , Florida 32301 (City) (Zip code)						
	(City) (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.

BRIAN COURTNEY, ASST. V.P.

(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: Ronald De Koven	
Chairman: Ronald De Koven Address: 41 East 11TH St., 11TH Floor,	NY, NY 10003
	00
Vice Chairman:	E 5 5
Address:	5 - 1
Director:	
Address:	**************************************
	·
Director:	
Address:	
President: Ronald DeKoven Address: 41 East 11TH Street, 11TH Floor, N	Y, NY 10003
Vice President:	
Address:	
Secretary: Orly Avidan-Or	ion
Address: 41 East 11TH Street, 11TH Floor,	NY, NY 10003
Treasurer: Orly Avidan-Oron	
Address: (Same)	
NOTE: If necessary, you may attach an addendum to the application listing additional add	onal officers and/or directors.
(Signature of Chairman, Vice Chairman, or any officer listed in nur	mber 12 of the application)
14 Ronald De Koven, Chair man	/
(Typed or printed name and capacity of person signing ann	lication)

PAGE 1

State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "CHATTELPAPER BD, INC." IS DELY
INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN
GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE
RECORDS OF THIS OFFICE SHOW, AS OF THE THIRD DAY OF NOVEMBER.

A.D. 2000

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES

Edward I. Freel, Secretary of State

AUTHENTICATION: 0774445

DATE: 11-03-00

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