## TRANSMITTAL LETTER

| TO: Registration Section Division of Corporations   |  | 7000003538   | 1247 <u>-</u> -7                      |
|---|--|--|---------------------------------------|
| •   | _  | -01/12/01<br>*****70.00  | U1092003<br>*****70.00                |
| SUBJECT: RIVER FINANCIAL GROUP, IN  | C.<br>ion - must include suffix)   |  | 224444410.00                          |
| (Name of corporat   | ion - mast morado sarrivi  |  |                                       |
| Dear Sir or Madam:  |  |  |                                       |
| The enclosed "Application by Foreign Corporation for "Certificate of Existence", and check are submitted to transact business in Florida. | or Authorization to Transact or egister the above reference                                      | Business in Florida",<br>ed foreign corporation                  |                                       |
| Please return all correspondence concerning this matt   | ter to the following:  |  |                                       |
| WILLIAM C. HURTT  |  |  | i —                                   |
| (Name   | of Person)   | •  |                                       |
| RIVER FINANCIAL GROUP, INC.   |  |  | _                                     |
| (Firm/C   | Company)   | ·  |                                       |
| 505 BEACHLAND BLVD. #1, SUITE 2   | 35   |  |                                       |
| (Ac   | idress)  |  | · · · · · · · · · · · · · · · · · · · |
| VERO BEACH, FL 32936  |  |  |                                       |
|   | e and Zip code)  |  | -                                     |
|   |  | OO<br>TA<br>TA   |                                       |
| For further information concerning this matter, pleas   | e call:  | ) JAN 1<br>CRETAR<br>LLAHASS                                     |                                       |
| JAMES C. BOURKE, CPA at (_732   | ) 842-3113   |  |                                       |
| (Name of Person) (Are   | ea Code & Daytime Telephor   | N 2: 45  |                                       |
| STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St.   | MAILING ADDRESS Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314 |  | nth                                   |
| Tallahassee, FL 32399  Enclosed is a check for the following amount:  | talialiassee, i.e. 32314   | (  | 1116                                  |
| □ \$78.75 Filing Fee & Certificate of Status  | ☐ \$78.75 Filing Fee & Certified Copy  | ☐ \$87.50 Filing Fee,<br>Certificate of Status<br>Certified Copy | ; &                                   |

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT

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.

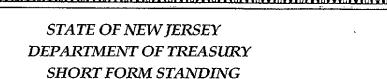
| MOLI TEDOEV                                      | t so contained in the name |              |               | 22-34466         | 00               |  |      |       |
|--|----------------------------|--------------|---------------|------------------|------------------|--|------|-------|
| 2. (State or country under the law of            | which it is incorporated)  | _ 3          |               | El number, if a  |                  |  |      |       |
| (State of country under the law of               | Willow it to meet per-in-  |              | •             | •                | ••               |  |      |       |
| 4. 6/7/96  |                            | 5. <u>PE</u> | RPETUAL       |                  | _ *              |  | 177) |       |
| (Date of incorporation)                          |                            | (Dura        | ation: Year c | orp. will ceas   | e to exist o     | r perpetua                             | 1 }  |       |
| 6. 12/1/00                                       |                            |              |               |                  |                  |  |      |       |
| (Date first transacted business in F             | lorida. If corporation has | not transa   | acted busines | s in Florida, in | sert "upon q     | ualificat ic                           | ח.") |       |
|  | (SEE SECTIONS 607.)        | 1501,607     | .1502 and 81  | (7.155, F.S.)    |                  |  |      |       |
| 7. 505 BEACHLAND BLVD                            | . #1. SUITE 235.           | VERO         | BEACH, F      | L 32936          |                  |  |      |       |
| 7. 303 BHIOTHER BETT                             | (Principal office          |              | <del> </del>  |                  |                  |  |      |       |
| SAME AS ABOVE                                    |                            |              |               |                  |                  |  |      |       |
|  | (Current mailing ac        | idress)      |               |                  |                  |  |      | -     |
|  |                            |              |               |                  |                  |  | _    |       |
| 8. TO TRANSAKT BUSINE                            | c c                        |              |               |                  |                  | .A.<br>33.                             | 00   |       |
| 8. TO TRANSACT BUSINE (Purpose(s) of corporation | authorized in home state o | r country    | to be carried | out in state of  | Florida)         | 与記                                     | JAN  |       |
| · •  |                            |              |               |                  |                  | ====================================== | 22   |       |
| 9. Name and street address of                    | Florida registered ag      | ent: (P.     | O. Box or N   | Mail Drop Bo     | x <u>NOT</u> acc | ebranie                                | 2    | ILED: |
| Name: WILLIAM C.                                 | HIRTT                      |              |               |                  |                  | 三二                                     |      |       |
| Name: WIEDZIGI G.                                | 110144                     |              | <del></del>   | · ·              | , ,              | EST.                                   |      | _     |
| Office Address: 505 BEACHL                       | AND BLVD. #1, SU           | ITE 23       | <u>5</u>      |                  |                  | 当当                                     | 2։ հ |       |
|  |                            |              |               | 20026            |                  |  | 54   |       |
| <u>VERO BEACH</u>                                |                            |              | _, Florida    | (Zip code)       | <del></del> ,    |  |      |       |
|  | (City)                     |              |               | (Zip code)       |                  |  |      |       |
|  |                            |              |               |                  |                  |  |      |       |

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 which it is incorporated.

## 12. Names and business addresses of officers and/or directors:

| DIRECTORS   |                                     |
|---|-------------------------------------|
| man: SAME AS ABOVE  |                                     |
| ess:  |                                     |
|   |                                     |
|   |                                     |
| Chairman:   |                                     |
| ess:  |                                     |
|   |                                     |
| etor:   |                                     |
| ess:  |                                     |
| CSS   |                                     |
|   |                                     |
| etor:   |                                     |
| ress:   |                                     |
|   |                                     |
| OFFICERS  |                                     |
|   | SE TA                               |
| ident: WILLIAM C. HURTT   | * 527 _                             |
| ress: 505 BEACHLAND BLVD. #1, SUITE 235                                     |                                     |
| VERO BEACH, FL 32936  | MO 11                               |
| e President:  |                                     |
|   | SE 29                               |
| iress:  | SH G                                |
|   |                                     |
| retary:   |                                     |
| iress:  |                                     |
| asurer:   |                                     |
| dress:  |                                     |
| 11033.  | *                                   |
| OTE: If necessary, you may attach an addendan to the application listing ad | ditional officers and/or directors. |
| 10)1000 and C. Huzll)-  |                                     |
| (Signature of Chairman, Vice Chairman, or any officer listed in             | number 12 of the application)       |
| WILLIAM C HILDER  |                                     |
| (Typed or printed name and capacity of person signing                       | application)                        |



RIVER FINANCIAL GROUP, 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 June 10, 1996.

As of the date of this certificate, said business continues as an active business in the State of New Jersey. Annual Reports are outstanding for the following year(s):

1998

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

William C Huztt Jr 236 Navesink Ave Atl Hgids, NJ 07716

Continued on next page . . .

SECRETARY OF STATE SECRETARY OF STATE OF STATE

