F01600000854

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	·
SUBJECT: Nationsfirst FINANCIA/ (opporation
(Name of corporation - must include s	uffix)
Dear Sir or Madam:	-02/12/0101160015 *****70.00 *****70.00
The enclosed "Application by Foreign Corporation for Authorization to T "Certificate of Existence", and check are submitted to register the above to transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
(Name of Person)	nat '
(Firm/Company)	Nacion
100 Sucamore J.	
Glastanbury CT 060	33
(City/State and Zip code)	SEC TALL
For further information concerning this matter, please call:	ANASSET ANASSE
Name of Person) at (860) 652-8 (Area Code & Daytime T	274 Pelephone Number) A G
	ATE 59
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 MAILING ADTREST Registration Section Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL	tion 900m porations 2/14
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$78.75 Filing Fee & \$78.75 Filing Fe Certificate of Status Certified Copy	e & \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO EGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	
	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.)	- -
2.	(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4. 6.	(Date of incorporation) 5. Persekval (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.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) (OO SUCOMORE ST. Glostabay, CT O6C33)	<u>.</u>
0	(Principal office address) 5ane as above (Current mailing address)	
8. 9.	(Purpose(s) of corporation authorized in home state of country to be carried out in state of Florida) Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	FILE
Ωŧ	Name: RAMON 5. CENDANA, JR. Stice Address: 833 MERCADO AVE.	?
Ο.	ORLANDO , Florida 32807 (City) (Zip code)	
He de fu	Registered agent's acceptance: aving been named as registered agent and to accept service of process for the above stated corporation at the signated in this application, I hereby accept the appointment as registered agent and agree to act in this cap or the agree to comply with the provisions of all statutes relative to the proper and complete performance of the statutes, and I am familiar with and accept the obligations of my position as registered agent.	acity. I
	<u>Cloudana</u>	
	(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:	
Address:	
Vice Chairman:	· · · · · · · · · · · · · · · · · · ·
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	00 SE
President: Rainier Cendana	
Address: 100 Sycamore S/	
Vice President: SCOTT STARR	2 D 5 P
viso resident.	
Address: 100 Sycamore St Glastoubons, CT 06033	<u> </u>
Secretary: TANKE CENDANA	
Address: 100 Sycamore St, Glastenbury, CT.	06033
Treasurer: JANICE CENDARA	
Address: 100 Sycamore St, Glastandy, CT	06053
NOTE: If necessary, you may 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	ne application)
14. JANKE CENCLANA	•
(Typed or printed name and capacity of person signing application)	

STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, SUE ANNE GILROY, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper office to execute this certificate.

I further certify that records of this office disclose that

NATIONSFIRST FINANCIAL CORPORATION

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on September 17, 1998, and was in existence or authorized to transact business in the State of Indiana on January 30, 2001.

I further certify this For-Profit Domestic Corporation has not filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this Thirtieth day of January, 2001.

SUE ANNE GILROY, Secretary of State

Sue anne Sitry