

F010000001928

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Amerifirst Financial Corporation
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following: 300003924173--9

Rich Niesen

(Name of Person)

Amerifirst Financial Corporation

(Firm/Company)

616 W. Centre

(Address)

Portage, MI 49024

(City/State and Zip code)

-03/28/01--01079--005
*****70.00 *****70.00

P96-18753

W01-7327

For further information concerning this matter, please call:

Rich Niesen

(Name of Person)

at (616) 324-4240

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed 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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

① - AmeriFirst
Direct Funding
Corp

- AmeriFirst Loans Inc

April 2, 2001

RICH NIESEN
AMERIFIRST FINANCIAL CORPORATION
616 W. CENTRE
PORTAGE, MI 49024

- AmeriFirst Home
Mortgage Corporation

SUBJECT: AMERIFIRST FINANCIAL CORPORATION
Ref. Number: W01000007327

We have received your document for AMERIFIRST FINANCIAL CORPORATION 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.

Please note that this adopted name is for use in Florida only, and does not affect your filing in Michigan in any way. You may not add "Florida" or "of Florida" to form your adopted name, and you may wish to call the number below to check the availability of any name you wish to adopt.

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) 487-6958.

Lee Rivers
Document Specialist

Letter Number: 801A0001948

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TALLAHASSEE FLORIDA

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned Mark A. Jones, do hereby certify
(Name)

that this Resolution of the Board of Directors of _____

Amerifirst Financial Corporation
(Corporate Name)

a corporation duly organized and existing under the laws of the State of Michigan,

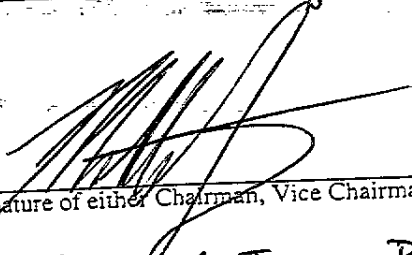
was duly adopted on April 6, 2001.

Be it resolved, that Amerifirst Financial Corporation,
(Corporate Name)

organized and existing in the State of Michigan, hereby adopts the name

Amerifirst Direct Funding Corp for use in Florida.

Dated: 4-6-01


Signature of either Chairman, Vice Chairman or any officer

Mark A. Jones, President
Type or print name

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SECRETARY OF STATE

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

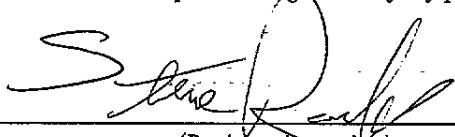
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Amerifirst Financial Corporation
(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. Michigan 3. 38-2699549
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. November 4, 1986 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon qualification
(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.)
7. (Corporate Headquarters) 616 W. Centre, Portage, MI 49024
(Principal office address)
616 W. Centre, Portage, MI 49024
(Current mailing address)
8. Mortgage Banker
(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: Steven S. Reszka
Office Address: 947 Siesta Dr
Ellenton, Florida 34222
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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.



(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

President: Mark A. Jones

Address: 2731 Jessica Ln.

Portage, MI 49024

Vice President: _____

Address: _____

Secretary: David N. Gahm

Address: 1879 Lake Club Dr., Gaylord, MI 49735

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

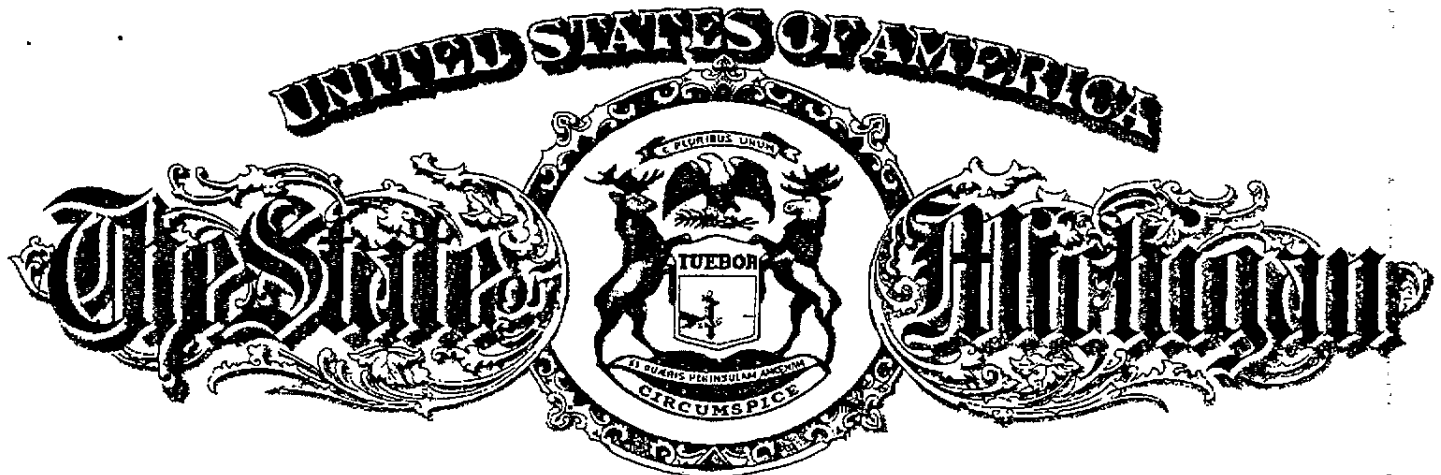
13. _____

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Mark A. Jones, President

(Typed or printed name and capacity of person signing application)

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TALLAHASSEE FLORIDA



Michigan Department of Consumer and Industry Services

Lansing, Michigan

This is to Certify That

AMERIFIRST FINANCIAL CORPORATION

was validly incorporated on November 4, 1986, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business or conduct affairs in Michigan and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 27th day of March, 2001

Andrew G. Mitchell, Director

Bureau of Commercial Services