

CT CORPORATION SYSTEM

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JUN -6 PM 1:54
TALLAHASSEE FLORIDA

CORPORATION(S) NAME

First Family Financial Services, Inc.

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-06/06/01--01054--017

*****78.75 *****78.75

			DIVISION OF CORPORATION 01 JUN -6 AM 11:22
<input checked="" type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger	
<input type="checkbox"/> Nonprofit	BK		
<input checked="" type="checkbox"/> Foreign	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark	
	<input type="checkbox"/> Reinstatement		
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Other	
<input type="checkbox"/> LLC	<input type="checkbox"/> Name Registration	<input type="checkbox"/> Change of RA	
	<input type="checkbox"/> Fictitious Name	<input type="checkbox"/> UCC	
<input checked="" type="checkbox"/> Certified Copy	<input type="checkbox"/> Photocopies	<input type="checkbox"/> CUS	
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem	<input type="checkbox"/> After 4:30	
<input checked="" type="checkbox"/> Walk In	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up	
<input type="checkbox"/> Mail Out			

Name
Availability _____
Document
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

6/6/01

Order#: 4497844

Ref#: _____

Amount: \$ _____

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

A CCH LEGAL INFORMATION SERVICES COMPANY

9

**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. First Family Financial Services, Inc.

(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. Delaware

(State or country under the law of which it is incorporated)

3. 52-2304606

(FEI number, if applicable)

4. March 22, 2001

(Date of incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. upon qualification

(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 300 St. Paul Place, Baltimore, Maryland 21202

(Current mailing address)

8. Consumer lending

(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: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida, 33324

(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.

C T Corporation System

Kathryn A. Widdowson, Special Assistant Secretary
(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 addresses of officers and/or directors:** (Street address **ONLY** - P.O. Box **NOT** acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: See attached list

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: See attached list

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. Teresa M. Baer
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Teresa M. Baer, Assistant Secretary
(Typed or printed name and capacity of person signing application)

FIRST FAMILY FINANCIAL SERVICES, INC.

DIRECTORS

John Brooke Duvall, III

James P. Murphy

David A. Smoley

BUSINESS ADDRESS

300 St. Paul Place
Baltimore, MD 21202

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Baltimore, MD 21202

300 St. Paul Place
Baltimore, MD 21202

OFFICERS

John Brook Duvall, III
Vice President

James P. Murphy
Vice President

David A. Smoley
Vice President

Linda S. Davis
Vice President and Secretary

Robert Hurley
Treasurer

Teresa M. Baer
Assistant Secretary

Karen Robb
Assistant Secretary

BUSINESS ADDRESS

300 St. Paul Place
Baltimore, MD 21202

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Baltimore, MD 21202

250 E. John Carpenter Freeway
Dallas, Texas 75062

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

State of Delaware
Office of the Secretary of State

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FIRST FAMILY FINANCIAL SERVICES, INC." IS DULY 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 FIFTH DAY OF JUNE, A.D. 2001.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

FILED
01 JUN -6 PM 1:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

3371817 8300

AUTHENTICATION: 1171476

010268658

DATE: 06-05-01