

**F0600006285**

**Florida Department of State  
Division of Corporations  
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**To:**  
Division of Corporations  
Fax Number : (850) 205-0383

**From:**  
Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

**FOREIGN PROFIT QUALIFICATION**

**LOAN RESOURCE CENTER, INC.**

Certificate of Status	0
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LOAN RESOURCE CENTER, INC.

## OPTIMA HOME MORTGAGE

Office: 201-662-1900  
Fax: 201-662-8005  
7515 Bergenline Ave.  
North Bergen, NJ 07047

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December 4, 2001

To Whom It May Concern:

Please note that the Certificate of Good Standing received from NJ Department of Treasury shows our former address. Because Annual Reports to the NJ Department of Treasury are done in conjunction with the filing of NJ Corporate Income Tax Returns, the Certificate of Good Standing bears the address at the time of our last filing (fiscal year ending December 2000). On May 1st, 2001, Loan Resource Center, Inc. dba Optima Home Mortgage moved to a new location. Our current address is 7515 Bergenline Avenue, North Bergen, NJ 07047. Enclosed, for your reference, is our Corporate License from the New Jersey Department of Banking and Insurance which verifies our current address.

Sincerely,



Robert Herrera  
President



Correspondent Mortgage Banker - NJ Department of Banking & Insurance  
"Borrower Friendly Home" is a registered Service Mark of Loan Resource Center, Inc.

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(3)

**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. LOAN RESOURCE CENTER, INC.  
(Name of corporation; the word "INCORPORATED," "COMPANY," or "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. NEW JERSEY  
(State or country under the law of which it is incorporated)

3. March 19, 1987 4. Perpetual  
(Date of Incorporation) (Duration)

5. 22-2898653  
(Federal Employer Identification number, if applicable)

6. Anticipating transactions to begin December 7, 2001  
(Date first transacted business in Florida. See sections 607.1501, 607.1502, and 817.155, F.S.)

7. 7515 Bergenline Ave. North Bergen, NJ 07047  
(Current mailing address)

8. Correspondent Mortgage Bankers  
(Brief description of the nature of the business in which it is engaged in the state of Florida)

9. Names and addresses of officers and or directors:

**A. Directors:**

Chairman: Robert Herrera  
Address: 1245 Jasmine Circle  
Weston, FL 33326

Vice Chairman: Gina Herrera  
Address: 1006 Pine Branch Drive  
Weston, FL 33326

Director: Orvelio Herrera  
Address: 1006 Pine Branch Drive  
Weston, FL 33326

Director: Carlo Oropesa  
Address: 7855 Boulevard East  
North Bergen, NJ 07047

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**ADDENDUM**

Re.: LOAN RESOURCE CENTER, INC.

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

**A. Directors (continued)**

Director: Evelyn Ortiz  
Address: 809 2nd Ave  
Secaucus, NJ 07094

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**B. Officers:**

<b>President: &amp; Secretary/</b>	Robert Herrera
<b>Address: Treasurer</b>	1245 Jasmine Circle
	Weston, FL 33326
<b>Vice President:</b>	Gina Herrera
<b>Address:</b>	1006 Pine Branch Drive
	Weston, FL 33326
<b>Secretaryx 2nd Vice Pres.</b>	Carlo Oropesa
<b>Address:</b>	7855 Boulevard East
	North Bergen, NJ 07047
<b>Treasurer 3rd Vice Pres.</b>	Evelyn Ortiz
<b>Address:</b>	809 2nd Avenue
	Secaucus, NJ 07094

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(If needed, you may attach an addendum to the application listing additional officers and/or directors.)

**10. Name and Street address of Florida registered agent:**

Name: Jonathan Kline  
 Office Address: 9050 Pines Blvd. Suite 250  
 Pembroke Pines, Florida 33024  
 Zip Code

**11. 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: \_\_\_\_\_

*Jonathan Kline Esq.*

12. 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.

13. \_\_\_\_\_

(Signature of Chairman, Vice Chairman, or any officer listed in number 9 of the application)

14. Robert Herrera - Chairman  
 President & Secretary/Treasurer  
 (Name and capacity of person signing application)

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STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING

LOAN RESOURCE CENTER, INC.  
With the Previous or Alternate Name  
OPTIMA HOME MORTGAGE (Alternate Name)

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*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 March 19, 1987.*

*As of the date of this certificate, said business  
continues as an active business in good standing  
in the State of New Jersey, and its Annual Reports  
are current.*

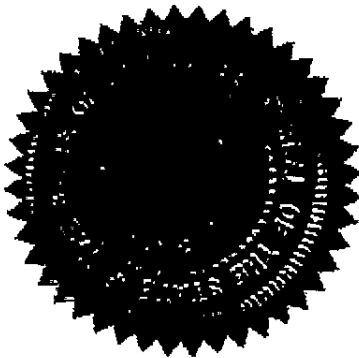
*I further certify that the registered agent and  
registered office are:*

Robert Herrera  
6509 Bergenline Ave  
West New York, NJ 07093

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STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING

LOAN RESOURCE CENTER, INC.  
With the Previous or Alternate Name  
OPTIMA HOME MORTGAGE (Alternate Name)



IN TESTIMONY WHEREOF, I have  
hereunto set my hand and  
affixed my Official Seal  
at Trenton, this  
26th day of November, 2001

A handwritten signature in cursive script, reading "Peter R. Lawrance".

Peter R Lawrance  
Acting State Treasurer

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