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SECRETARY OF STATE
TALLAHASSEE, FLORDA

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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations							
SUBJECT: Municipal Capital Respurces, Inc. (Name of corporation - must include suffix)							
Dear Sir or Madam:							
The enclosed "Application by Foreign Corporation for a "Certificate of Existence", and check are submitted to reto transact business in Florida.							
Please return all correspondence concerning this matter	to the following:						
Bruno D. Trimpoli	<u> </u>						
(Name of	Person)						
Municipal Capital Resources, In-	c						
(Firm/Cor	mpany) 7A SE						
5304 Burchette Rd.		1. ب					
Tampa, FL, 33647 (Address) ASSET OF TARRY OF T							
(City/State a	all:						
For further information concerning this matter, please call:							
Bruno D. Trimpoli at (813) 978-3100 (Name of Person) (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 & S87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy	•					



FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

December 13, 2002

BRUNO D. TRIMPOLI 5304 BURCHETTE ED TAMPA, FL 33647

SUBJECT: MUNICIPAL CAPITAL RESOURCES, INC.

Ref. Number: W02000034940

We have received your document for MUNICIPAL CAPITAL RESOURCES, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6913.

Letter Number: 702A00065937

Diane Cushing Corporate Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee Florida 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.	Municipal Capital Resources, 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 3. 51-0369764 (State or country under the law of which it is incorporated) (FEI number, if applicable)						
4.	November 30, 1994 (Date of incorporation) 5. Perpetual (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 qualificat ion.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)						
7.	5304 Burchette Rd. Tampa, FL, 33647 (Principal office address)						
	5304 Burchette Rd., Tampa, FL, 33647 (Current mailing address)	1					
8. 9.							
	Name: Bruno D. Trimpoli						
Ο:	Mice Address: 5304 Burchette Rd. Tampa , Florida 33647 (City) (Zip code)						
	(and)						

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.

Degistered 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. DIRECT	FORS	
Chairman: _F	Bruno D. Trimpoli	
Address:	5304 Burchette Rd.	
	Fampa, FL, 33647	
Vice Chairman	n: <u>Lucretia Trimpoli</u>	
Address:	251 Altamont Ave.	
	Schenectady, NY, 12303	
Director:	Sharon Haynes	
Address:	2121 W. Dallas Ave.	
	Tampa, FL, 33603	
Director:	Suzanne Alami	
Address:	11 Rhonda Lane	02 SEC
	Commack, NY, 11725	CRET OF C
B. OFFICE		ARY O
President:	Bruno D. Trimpoli	FE ST
	5304 Burchette Rd.	⊉
	Tampa, FL, 33647	_ -
Secretary:	Sharon Haynes	
	2121 W Dallas Ave Tampa VI 33603	
Treasurer:	11.00	
Address:		
NOTE: If no	ecessary, you may attach an addendum to the application listing additional	officers and/or directors.
13.	1/4	
-	(Signature of Chairman, Vice Chairman, or any officer listed in number	
14	Bruno D. Trimpoli (Typed or printed name and capacity of person signing applicate	tion)

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MUNICIPAL CAPITAL RESOURCES, 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 THIRTEENTH DAY OF NOVEMBER, A.D. 2002.

SECRETARY OF STATE



Warriet Smith Hindson
Harriet Smith Windson, Secretary of State

AUTHENTICATION: 2085370

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