Division of Corporations

COMPLIANCE CONSLITING

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Division of Corporations Public Access System

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Division of Corporations Fax Number : (950)205-0383

From:

Account Name : COMPLIANCE CONSULTING CORPORATION OF FLORIDA Account Number : 120010000135
Phone : (561)586-3645
Fax Number : (561)586-6335

FOREIGN PROFIT QUALIFICATION

Capitol City Mortgage, Inc.

Certificate of Status	0	7
Certified Copy	0	
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Estimated Charge	\$70.00	

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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. Capitol City Mortgage, 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. Indiana 35-2157818
 (State or country under the law of which it is incorporated) (FEI number)
- 4. /2-13-2001 5. Perpetual (Date of Incorporation) (Duration)
- 6. Upon Qualification
 (Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502 and 817.155, F. S.)
- 7. 13005 Parkside Drive Fishers, IN 46038 (Current mailing address)
- 8. Mortgage brokerage and lending
 (Purpose(s) of corporation authorized in home state or 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)

Name: Compliance Consulting Corporation of Florida 521 Lake Avenue, Suite 4 Lake Worth, FL 33460

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 to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Kon Lovell, President

(Registered agent's signature)

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11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application 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:

Curt A. Dittmaier, President 1155 Bear Cub Drive

Cicero, IN 46034

Aleta Z. Dittimaier, VP 1155 Bear Cub Drive Cicero, IN 46034

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

14. Curt A. Dittmaier, President (Typed or printed name and capacity of person signing application)

Rug Foreign Corp. wps

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

To Whom These Presents Come, Greetings:

I, TODD ROKITA, 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 proper official to execute this certificate.

I further certify that records of this office disclose that

CAPITOL CITY MORTGAGE, INC.

duly filed the requisite documents to commence business activities under the laws of State of Indiana on December 13, 2001, and was in existence or authorized to transact business in the State of Indiana on July 14, 2003.

I further certify this For-Profit Domestic Corporation has 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 Whercof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Fourteenth Day of July, 2003.

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TODD ROKITA, Secretary of State

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