

FD3000005397

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

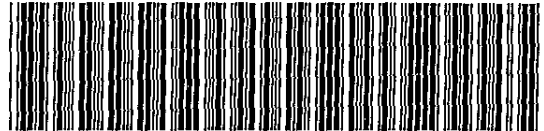
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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FD3-5397
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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Integrity Funding, Inc.
(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:

Iris Krug
(Name of Person)
Integrity Funding, Inc.
(Firm/Company)
45 North Main Street, Suite 4
(Address)
Marlboro, New Jersey 07746
(City/State and Zip code)

For further information concerning this matter, please call:

Iris Krug at (732) 761-9803
(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 & Certified Copy ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**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. Integrity Funding, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

I.F.F.L. Inc.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. New Jersey 3. 22-3720102
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 3-31-2000 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. 45 North Main Street, Suite 4, Marlboro, NJ 0774
(Principal office address)

same
(Current mailing address)

8. Mortgage Business
(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: Terry Krug

Office Address: 9602 Orchard Grove Trail
Boynton Beach, Florida 33437
(City) (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.



(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: Bruce Krug
Address: 45 North Main Street, Suite 4, Marlboro, NJ 07746

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Bruce Krug
Address: 45 North Main St., Suite 4, Marlboro, NJ 07746

Vice President: Iris Krug
Address: 45 North Main St., Suite 4, Marlboro, NJ 07746

Secretary: Iris Krug
Address: 45 North Main Street, Suite 4, Marlboro, NJ 07746

Treasurer: Bruce Krug
Address: 45 North Main Street, Suite 4, Marlboro, NJ 07746

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

13. Iris Krug
(Signature of Director or Officer listed in number 12 of the application)

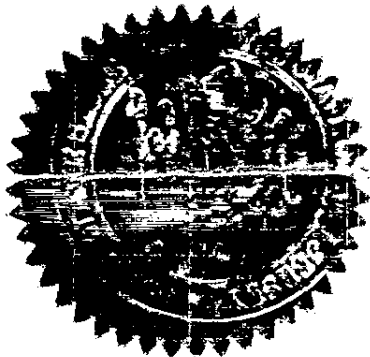
14. Iris Krug
(Typed or printed name and capacity of person signing application)

STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
FILING CERTIFICATION (CERTIFIED COPY)

INTEGRITY FUNDING, INC.

*I, the Treasurer of the State of New Jersey,
do hereby certify, that the above named business
did file and record in this department the below
listed document(s) and that the foregoing is a
true copy of the
Certificate Of Incorporation
as the same is taken from and compared with the
original(s) filed in this office on the date set
forth on each instrument and now remaining on file
and of record in my office.*

IN TESTIMONY WHEREOF, I have
hereunto set my hand and
affixed my Official Seal
at Trenton, this
8th day of October, 2003



A handwritten signature in cursive script, reading "John E. McCormac".

John E McCormac, CPA
State Treasurer

MAR 31 '00 14:30 FR CORP. LAW DEPT.

201 716 1064 TO 916099846851

P.03/03

Mail to: PO Box 308
Trenton, NJ 08625STATE OF NEW JERSEY
DIVISION OF REVENUEOvernight to: 225 West State St.
3rd Floor
Trenton, NJ 08608-1001PUBLIC RECORDS FILING FOR NEW BUSINESS ENTITY **DP**

Fill out all information below INCLUDING INFORMATION FOR ITEM 12, and sign in the space provided. Please note that once filed, this form constitutes your original certificate of incorporation/formation/registration/authority, and the information contained in the filed form is considered public. Refer to the instructions for delivery/return options, filing fees and field-filing requirements. Remember to remit the appropriate fee amount. Use attachments if more space is required for any field, or if you wish to file for the public record.

1. Business Name:

Integrity Funding, Inc.

2. Alternate Business Name:

3. Type of Business Entity: DP
(See Instructions for Codes, Page 19, Item 3)4. Business Purpose:
(See Instructions, Page 20, Item 4)

5. Stock (Domestic Corporations Only - Total Shares):

100

6. Duration (If Indefinite or Perpetual, Leave Blank):

7. State of Formation/Incorporation (Foreign Entities Only):

8. Date of Formation/Incorporation (Foreign Entities Only):

9. Contact Information:

Registered Agent Name: Bruce Howard Krug

Registered Office

(Must be a New Jersey address with street address)

Street 25 Graversham DriveCity Marlboro, N.J. Zip 07746

Main Business or Principal Business Address

(If different than the Registered Office)

Street

City State Zip

10. Management (Domestic Corporations and Limited Partnerships Only)

- For-Profit and Professional Corporations list initial Board of Directors, minimum of 1;
- Domestic Non-Profits list Board of Trustees, minimum of 3;
- Limited Partnerships list all General Partners.

| Name | Street Address | City | State | Zip |
|-------------------|-------------------|----------|-------|-------|
| Bruce Howard Krug | 25 Graversham Dr. | Marlboro | N.J. | 07746 |

The signatures below certify that the business entity has complied with all applicable filing requirements pursuant to the laws of the State of New Jersey.

11. Incorporators (Domestic Corporations Only, minimum of 1)

| Name | Street Address | City | State | Zip |
|-----------------|---------------------|----------|-------|-------|
| Iris Renee Krug | 25 Graversham Drive | Marlboro | N.J. | 07746 |

** Signature(s) for the Public Record (See instructions for Information on Signature Requirements)

Signature

Name

Title

Date

Iris Renee Krug Iris Renee Krug Incorporator 3/31/2000

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** TOTAL PAGE.03 **