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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations SUBJECT: ROBERT NIELSON Jr. Morrgage Consultants, Island Some (Name of corporation - must include suffix) Dear Sir or Madam:
SUBJECT: ROBERT NIELSON Jr. Morrgage Consultants, Island Son (Name of corporation - must include suffix)
(Italiae of corporation - intast include surial)
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:
ROBERT NIELSON Jr. (Name of Person)
(Name of Person)
ROBERT NIELSON IT. Mortgage Consultants Inc. (Firm/Company)
11410 Bent Pine Drive (Address)
FORT Myers FL 33913 (City/State and Zip code)
(City/State and Zip code)
For further information concerning this matter, please call:
(Name of Person) at (239) 768-2498 (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 \$\ \text{S78.75 Filing Fee & }\ \text{Certificate of Status} \text{Certified Copy} \ \ \text{S78.75 Filing Fee & }\ \text{Certified Copy} \text{Certified Copy} \text{S87.50 Filing Fee, }\ \text{Certificate of Status & }\ \text{Certified Copy} \text{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.	١.
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. ROBERT NIELSON TR. MortGage Consultants, 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. New YORK 3. 11-32 1886 (State or country under the law of which it is incorporated) (FEI number, if applicable)	9
4. 5 10 94 5. Perpetual (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 qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	
7. 11410 Best Pine Drive Ft. Myers FL 33913 (Principal office address)	
11410 Bent Pine Drive Ft Myers FL 33913 (Current mailing address)	
8. MORTGAGE Brokerage - ORIGINATION & PROCESSING (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: Kobert Nielson Tr	; ;
City), Florida 33913 (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)	- - -
(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:	ROBERT S. Niclson Jr.	
Address:	11410 Best Pine Drive 9/	By A
	Ft Myers FL 33913	toy of
	n:	40 C A
		To the second
		100/1
Directors		- OA
Address:		
		-
Director:		
Address:		
B. OFFICE	RS	<u>,</u>
	ROBERTS NIELSON JR.	
	11410 Bent Pine Drive	
	FL. Myers FL 33913	
Vice Presiden	t:	
Address:		
Secretary:	Roberts Nielson Jr.	
Address:	SAME	
Treasurer:	Roberts Nielson Ir	
Address:	Same	
NOTE: If no	ecessary, you may attach an addendum to the application listing additional officers and/or direc	otors
	\mathcal{D} , $l \leq q \leq 1$	JIOIS.
13	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application	on)
14.	ROBERT S. NIELSON IR. PRESIDENT	,
	(Typed or printed name and capacity of person signing application)	

State of New York Department of State

I hereby certify, that the Certificate of Incorporation of ROBERT NIELSON, JR., MORTGAGE CONSULTANTS, INC. was filed on 05/10/1994, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

The Biennial Statement is past due.

Witness my hand and the official seal E of the Department of State at the City of Albany, this 14th day of October two thousand and three.

Secretary of State

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