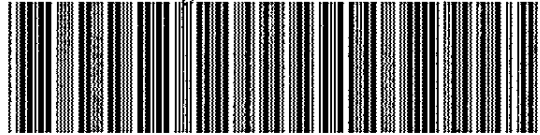


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2004 MAR 16 12 53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



300030381863

03/16/04--01087--004 **78.75

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TWO GREENWOOD SQUARE, SUITE 110
3331 STREET ROAD, BENSALEM, PA 19001
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FAX (215) 633-8160
E-MAIL: info@cgco.com

2004 MAR 18 P 12:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

March 11, 2004

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

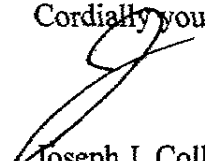
RE: FIRST MUTUAL CORP.

Dear Sir or Madam:

Enclosed is duplicate Application for Authority of the above company for filing with your office, together with Certificate of Good Standing and \$78.75 company check to cover filing fees.

Please send your usual acknowledgment and receipt to this office when the filing has been completed. Thank you.

Cordially yours,


Joseph J. Collopy
Vice-President

JJC/mag
Enclosures

FILED

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

2004 MAR 16 P 12: 5

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: First Mutual Corp.
(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:

Lawrence R. Lesiger
(Name of Person)

First Mutual Corp.
(Firm/Company)

523 Hollywood Ave., Suite 300
(Address)

Cherry Hill, NJ 08002
(City/State and Zip code)

For further information concerning this matter, please call:

Carolyn Keith at (856) 663-7800
(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.

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2004 MAR 16 P 12:1
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. First Mutual Corp.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. New Jersey 3. 21-0727447
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 2-27-58 5. _____
(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. 523 Hollywood Ave., Suite 300, Cherry Hill, NJ 08002
(Principal office address)
P.O. Box 8443, Cherry Hill, NJ 08002
(Current mailing address)

8. Application for mortgage lender license
(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: Edwin F. Blanton

Office Address: 825 Thomasville Road

Tallahassee, Florida 32303
(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: A. B. Wolf
Address: 523 Hollywood Ave., Suite 300
Cherry Hill, NJ 08002

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2004 MAR 16 P 12:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Vice Chairman: _____

Address: _____

Director: Lawrence R. Lesiger

Address: 523 Hollywood Ave., Suite 300
Cherry Hill, NJ 08002

Director: Jack Weinstock

Address: 523 Hollywood Ave., Suite 300
Cherry Hill, NJ 08002

B. OFFICERS

President: Lawrence R. Lesiger

Address: 523 Hollywood Ave., Suite 300
Cherry Hill, NJ 08002

Vice President: _____

Address: _____

Secretary: Carolyn Keith

Address: 523 Hollywood Ave., Suite 300, Cherry Hill, NJ 08002

Treasurer: _____

Address: _____

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

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. _____

Lawrence R. Lesiger, President

(Typed or printed name and capacity of person signing application)

STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

FIRST MUTUAL CORP.
33081500

With the Previous or Alternate Name
ALL ABOUT MORTGAGES (Alternate Name)

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2004 MAR 16 P 12: 53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*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 February 27, 1958.*

*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:*

A B Wolf
523 Hollywood Ave Ste 300
Cherry Hill, NJ 08002

Continued on next page . . .

STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

FIRST MUTUAL CORP.

FILED

2004 MAR 11 P 12

SECRETARY OF ST.
TALLAHASSEE, FLORIDA



IN TESTIMONY WHEREOF, I have
hereunto set my hand and
affixed my Official Seal
at Trenton, this
4th day of March, 2004

John E. McCormac, CPA
State Treasurer