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TALLANASSEE FLUTE

TRANSMITTAL LETTER

TO: Registration Section

Division of Co	rporations					
SUBJECT: Stream	line Equity Mortga	ge Servic	es, Inc.			
	(Name of	corporatio	n - must include suffix))		_
Dear Sir or Madam:						
The enclosed "Applicat" "Certificate of Existence transact business in Flo	e", and check are sub-	ration for a	Authorization to Transa egister the above refere	act Business nced foreig	s in Florida", n corporation	to
Please return all corresp	ondence concerning t	his matter	to the following:			
Stacy L. Giannetto			ann a hair a hair tha laig			
		(Name of	Person)	·		
Streamline Equity l	Mortgage Services,	Inc.	·- , ·	e=/.	<u>.</u>	,
		(Firm/Con		-`	<u> </u>	 -
2680 Merrick Road	, <u>*</u>		į.		1AT 2	
		(Addr	ess)		Fred B	
Bellmore, N.Y. 117	10					
For further information	·	•	nd Zip code)	ross	13 P 2 46	
Stacy L. Giannetto	at.	516	781-7990		<i>-</i>	
(Name of Pers			Code & Daytime Teleph	ione Numb	er)	
STREET ADDRESS: Registration Section Division of Corporation 409 E. Gaines St. Tallahassee, FL 32399			MAILING ADDRES Registration Section Division of Corporati P.O. Box 6327 Tallahassee, FL 3231	ons		
Enclosed is a check for	the following amount	:				
☐ \$70.00 Filing Fee	S78.75 Filing Fe Certificate of Se		\$78.75 Filing Fee & Certified Copy	Cert	50 Filing Fee, ificate of Stat ified 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.	Streamline Equity Mortgage Services, Inc.	
	(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 York 3, 65-1208167	
	(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4.	10/02/2003 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.	2680 Merrick Rd., Bellmore, N.Y. 11710	
	(Principal office address)	-
	2680 Merrick Rd., Bellmore, N.Y. 11710	C
	(Current mailing address) ジュ —	France
R	New York base Mortgage Broker Operation	
	(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: Andrea Giannetto	
€.	Office Address: 5065 NW 121 Drive	
	Coral Springs , Florida 33076	
	(City) (Zip code)	

(0. 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: Stacy L. Giannetto	<u> </u>		Si Fee V		<u> </u>
Address: 2536 Horace Court, Bellmore,	N.Y. 11710	<u> </u>			<u>, , , , , , , , , , , , , , , , , , , </u>
				: <u>سر سر سن سن</u>	<u> </u>
Vice Chairman:		, - 	<u>. 13.99</u>	<u>-</u>	
Address:		<u></u>	y 3\$* · _ · - ^		
					, <u></u>
Director;				_ <u></u>	<u></u>
Address:			. 1		<u> </u>
		· ·-·	<u>.</u> . <u> </u>	<u></u>	
Director:			<u> </u>	<u> </u>	
Address:		<u> </u>	<u> </u>		<u> </u>
	· · · · · · · · · · · · · · · · · · ·	<u></u>			<u> </u>
B. OFFICERS				SECT SECT	
President: Stacy L. Giannetto		• ,		C 1	
Address: 2536 Horace Court, Bellmore,					
		· · · · ·	10.7 第二		5
Vice President:					
Address:	<u> </u>	_ <u></u>		<u> </u>	
				<u></u>	·
Secretary:	<u> </u>		<u> </u>		
Address:			<u> :=: </u>	<u> </u>	, , , , , , , , , , , , , , , , , , ,
Treasurer:	مضع من المقاد المام الخاش		<u> </u>		
Address:	· · · · ·		· · · · · · · · · · · · · · ·		<u> </u>
				• • • • •	
NOTE: If necessary, von may attach an adde	endum to the application T	isting add	ditional offic	ers and/or dire	ctors.
13. Signature of Director or Off	icer listed in number 12 of	f the appl	ication)		·
14. Stacy L. Giannetto, President		••		, en	

(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 STREAMLINE EQUITY MORTGAGE SERVICES, INC. was filed on 10/02/2003, 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.

Witness my hand and the official seal of the Department of State at the City of Albany, this 08th day of March two thousand and four.

Secretary of State

Secretary of State

Secretary of State

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