

FU4000003441

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

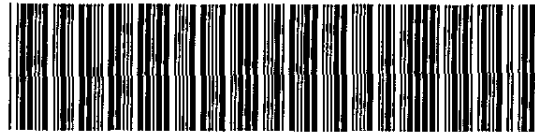
(Business Entity Name)

(Document Number)

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FLORIDA COMPLIANCE SPECIALISTS, INC.

DAVE TAYLOR, PRESIDENT



2331 Hansen Place
Tallahassee, Florida 32301
Voice: (850) 942-5464 Fax: (850) 942-5111
www.floridacompliance.com

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TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. MG FINANCIAL Corporation
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☒ Walk in ☒ Pick up time 6-18-04 ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☒ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials

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.

FILED
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TALLAHASSEE
FLORIDA

1. MG FINANCIAL CORPORATION

(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. RHODE ISLAND

(State or country under the law of which it is incorporated)

3. 56-2424063

(FEI number, if applicable)

4. 12/24/2003

(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. 4 RICHMOND SQUARE 3RD FL. PROVIDENCE, RI 02906

(Principal office address)

2 HAYES AVENUE JOHNSTON, RI 02919

(Current mailing address)

8. MORTGAGE BROKERING / CORRESPONDENT MORTGAGE LENDER

(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: Florida Compliance Specialists

Office Address: 2331 HANSEN PLACE

TALLAHASSEE

(City)

, Florida 32301

(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.

Dr. Taylor
(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: MICHAEL V. TORTORELLA

Address 2 HAYES AVENUE
JOHNSTON, RI 02919

Vice Chairman GAIL L. LUCIANO

Address 766 STRAWBERRYFIELD RD. WEST
WARWICK, RI 02886

Director _____

Address _____

Director: _____

Address: _____

B. OFFICERS

President: MICHAEL V. TORTORELLA

Address 2 HAYES AVENUE
JOHNSTON, RI 02919

Vice President GAIL L. LUCIANO

Address 766 STRAWBERRYFIELD RD. WEST
WARWICK, RI 02886

Secretary: _____

Address _____

Treasurer: _____

Address _____

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

13. Michael V. Tortorella

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

14. MICHAEL V. TORTORELLA, PRESIDENT

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



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State

Matthew A. Brown
Secretary of State

The Office of the Secretary of the State of Rhode Island and Providence Plantations, HEREBY CERTIFIES, that

MG FINANCIAL CORPORATION

a Rhode Island corporation, filed original articles of incorporation in this office on the twenty-fourth day of December A.D., 2003 with an effective date of the first day of January A.D., 2004; and

IT IS FURTHER CERTIFIED that said corporation is now of record and in good standing in this office.

*SIGNED AND SEALED this seventh day
of June, 2004.*

Matthew Brown

Secretary of State

BK *Debra Antonelli*

