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## TRANSMITTAL LETTER

	stration Section sion of Corporati	ons					
SUBJECT:	Dream House	Mortgage Corporation	ı				
			ration - must include suffix)				
Dear Sir or M	ladam:						
"Certificate o			for Authorization to Transacto register the above referen			to	
Please return	all corresponder	ce concerning this ma	atter to the following:				
M'Liss K. Rin	aldi, Esq.						
		(Nam	e of Person)				
Shechtman F	lalperin Savage,	LLP					
		(Firm	/Company)	<del>-</del>	<del></del>		
86 Weybosse	et Street						
		(A	Address)	<del></del>	<del></del>		
Providence, F	RI 02903						
		(City/Sta	ate and Zip code)				
For further in	formation conce	rning this matter, plea	se call:				
M'Liss K. Rina	aldî	at (401	<sub>)</sub> 272-1400		T/s	0	
(Nan	ne of Person)		ea Code & Daytime Teleph	one Number)	EChe i :	1 "INF 1	7
Regis Divis 409 E	EET ADDRESS stration Section ion of Corporation. Gaines St. hassee, FL 3239	ons	MAILING AI Registration S Division of Co P.O. Box 6322 Tallahassee, F	ection orporations	AHASSEE, FLORIDA	04 JUL 12 PH 3: 34	
Enclosed is a	check for the fol	lowing amount:					
<b>□ \$</b> 70.00 Fil	_	78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	S87.50 Fi Certifica Certified	te of Stat		



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 2, 2004

M'LISS K. RINALDI, ESQ SHECHTMAN HALPERIN SAVAGE, LLP 86 WEYBOSSET ST PROVIDENCE, RI 02903

SUBJECT: DREAM HOUSE MORTGAGE CORPORATION

Ref. Number: W04000025464

We have received your document for DREAM HOUSE MORTGAGE CORPORATION and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please 24 (850) 245-6025.

Trevor Brumbley Document Specialist

Letter Number: 804A00043042

Division of Corporations - P.O. ROX 6327 - Tallahassaa, Florida 3231/

## 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. Dream House !	Mortgage Corporation					
	orporation; must include "INCORPORAT orp," "Inc," "Co," or "Corp.")	ED	," "COMPANY," "CORPORATION,"		<del></del>	
				<del></del>		
(If name unavails	able in Florida, enter alternate corporate na	ame	adopted for the purpose of transacting busine	ess in Flori	da)	
2. Rhode Island		_ 3.	05-0439879			
(State or country	under the law of which it is incorporated)		(FEI number, if applicable)			
4. May 26, 1988		5.	Perpetual			
(Date	of incorporation)	-	(Duration: Year corp. will cease to exist or	"perpetua	I")	
6.						
			n Florida, if prior to registration)			
	,	)7.I	502, F.S., to determine penalty liability)			
7. 385 South Main	Street, Providence, RI 02903					
	(Principal office	ado	iress)			
385 South Main	Street, Providence, RI 02903					
	(Current mailing	ado	Iress)			
1. Fautagas laugi						
v	ng and brokering		ountry to be carried out in state of Florida)			
(r utpose(s	or corporation authorized in nome state of	01 0	odniny to be carried out in state of Piorida)			
<ol><li>Name and stree</li></ol>	t address of Florida registered agent:	(P.	O. Box NOT acceptable)	ESE SE	2	
Name:	CT Corporation System			E À	)4 JUL 12 PM 3: 34	
			_	AS	<u>-</u>	=
Office Address:	1200 South Pine Island F	<u>toa</u>	<u>d</u>	SEE .	- <del></del>	ED
	Plantation		, Florida 33324	<u> </u>	ž	O
	(City)		(Zip code)	SE	ىي دە	
10 Pagietavad sa	gent's acceptance:			<b>8</b> 7	ᆓ	
		erv	ice of process for the above stated corpor	ration at t	he pla	ce
designated in this	application, I hereby accept the appo	int	ment as registered agent and agree to ac	t in this co	<i>pacit</i>	y. I
			relative to the proper and complete perfo	rmance oj	f my d	uties,
ana x am jamiliar	with and accept the obligations of my	pe	sition as registerea agent.			
	( Hallan has	,	LAUREN H KREATT	,		
	(Registered agent's signate	ure	SPECIAL AS SISTANT SECON	TARY		
	_		٧	.,		

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: N/A	
Address:	
NIA	
Vice Chairman: N/A	· · · · · · · · · · · · · · · · · · ·
Address:	
Director: N/A	
Address:	
Director: N/A	
Address:	
B. OFFICERS	
President: John C. Ponte	
Address: 5 Cedar Rock Meadows, East Greenwich, Rhode Island 02818	
Vice President:	
Address:	
Autress	
John O. Donto	ALC C
Secretary: John C. Ponte	
Address: 5 Cedar Rock Meadows, East Greenwich, Rhode Island 02818	
Treasurer: John C. Ponte	
Address: 5 Cedar Rock Meadows, East Greenwich, Rhode Island 02818	ပ်င့် မှ
	34 34
NOTE: If necessary, you may attach an addendum to the application listing additional officers	s and/or directors.
13.	· · · · · · · · · · · · · · · · · · ·
(Signature of Director or Officer listed in number 12 of the application)	
14. John C. Ponte, President  (Typet or printed name and capacity of person signing application)	
I I When or name and canacity of nerson signing annication (	

. . . .



## 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

### DREAM HOUSE MORTGAGE CORPORATION

a Rhode Island corporation, filed original articles of incorporation in this office on the eighteenth day of May A.D., 1988 with an effective date of the twenty-sixth day of May A.D., 1988; and

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

SIGNED AND SEALED this eighteenth day of June, 2004.

Secretary of State

Matter Brown

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