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## TRANSMITTAL LETTER

TO:	Regis Divisi	tration Section of Corp	tion orations	3										
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Dear Sir	or M	adam:												
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Please re	eturn a	ıll correspo	ndence	concerning	g this m	atter to	the fe	ollowin	g:					
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For furth	ner inf	ormation c	oncernii	ng this mat	ter, plea	ase call	l:					FLORIUA	33	
HER		e of Person		at	( <u>6 /</u> (A)				<i>1908</i> e Telepi					
]	Regist Divisi 409 E	ET ADDI ration Sect on of Corp Gaines St assee, FL	cion orations					Regis Divis P.O.	LING A stration of C ion of C Box 632 hassee,	Section Corpora 27	tions			
Enclosed	d is a c	heck for th	e follov	ving amou	nt:									
<b>□ \$</b> 70.0	0 Fili	ng Fee	\$78. Cer	75 Filing F tificate of	Fee & Status			Filing ed Cop			Certifi	Filing licate of lied Cop	Status	&

# 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. FIRST A	MERICAN REA poration; must include "INC	L ESTATE	AND FO	NAUCE CO	RP.	-
	p," "Inc," "Co," or "Corp.")	ORPORATED," "C	OMPANI,	"CORPORATION,"		
(If name unavailab	le in Florida, enter alternate o	corporate name adoj	oted for the pur	rpose of transacting l	ousiness in Florida)	-
-		·				
2. STATE (	nder the law of which it is inc	3	<u> </u>	/ <i>X/X30</i> / El number if annlice	oble)	-
4. MALC	H 7, 1995 fincorporation)	5	PER	PETUAL		<del></del>
(Date o	f incorporation)	(D	uration: Year	corp. will cease to ex	dist or "perpetual")	
6						_
		ncted business in Flo 7.1501 & 607.1502,			•	
7. 13.22 EDN	A ST. SE GA	CAND RAPID	5, MI	49507		_
	(Princ	cipal office address)				
	5AW	1E ent mailing address)			₹ <sub>o</sub>	_
	(Curr	ent mailing address)				
					E E	77
8. <b>BROK</b>	ER FIRST .	SECOND M	DRIGAG	ES	ASSET 3	- 17************************************
(Purpose(s)	of corporation authorized in h	nome state or countr	y to be carried	out in state of Floric	la) mi	Z-may-se
	address of Florida registere	- '		eptable)	AM IO: 33	画 う
Name:	NRAI Servi	ces, Inc.	_		33 RIDA	
Office Address:	536 E. far	KArenu	<u>e</u>		***	
	1allahass (City)	see	, Florida	32 <u>30/</u>		
	(City)			Zip code)		
10. Registered age	nt's acceptance:					
Having been named	l as registered agent and t	o accept service o	f process for	the above stated co	orporation at the	place
designated in this a	pplication, I hereby accep nply with the provisions o	t the appointment	as registered	i agent and agree i	to act in this capa	CITY. I v dutiae
juriner agree io con and I am familiar w	nply wun the provisions of vith and accept the obligat	j un sumes reiui tions of mv positio	n as register	per unu compieie j ed ageni.	respossibilities of m	у шишел,
	RAI SONICES, IN			•		
, , ,						
		~				
<del></del>	Registered ago	ent's signature)	ckie Sa	iman, Asst.	Sec_	
11. Attached is a ce the Department of S	rtificate of existence duly tate, by the Secretary of St	authenticated, not tate or other offici	more than 90 al having cus	days prior to delivited of corporate re	ecords in the juris	ation to diction

under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS	
Chairman: HERBERT REVNORES	
Address: 14100 SPRUCE FOREST DR.	
LOWELL, MI 49331	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: HERBERT REINDERS	<i>≥</i> 8. ~
Address: 14100 SPRUCE FOLEST DR.	LLA SI
LOWELL, MI 49331	SEP SEP
Vice President:	တို့သို့ ယ် ့
Address:	To B I
	0: 3 0R
director or location	SA SA
Secretary: HERBERT REINDERS	
Address: 14100 SPRUCE FOREST OR LOWELL, MI	4933)
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional off	icers and/or directors
	ions and or unocors.
13. (Signature of Director or Officer listed in number 12 of the application of the appli	on)
14. HERBERT REINDERS - PRESIDENT - CHAIR	
(Typed or printed name and capacity of person signing application	

DOM 180 181 185

#### United States of America

#### State of Wisconsin



### DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Presents Shall Come, Greeting:

I, RAY ALLEN, Administrator, Division of Corporate & Consumer Services, Department of Financial Institutions, do hereby certify that

#### FIRST AMERICAN REAL ESTATE AND FINANCE CORPORATION

is a domestic corporation organized under the laws of this state and that its date of incorporation is March 7, 1995.

I further certify that said corporation has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921 or 181.1622, Wis. Stats., and that it has not filed articles of dissolution.

> IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on July 21,420045

RAY ALLEN, Administrator

Division of Corporate & Consumer Services

Department of Financial Institutions

BY: Solut Karis