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SECILIAIASSEE, FLORIDATE

#### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: Ultimate Financial Corporation
(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:
Maricela Guzman
(Name of Person)
Ultimate Financial Corporation
(Firm/Company) 7601 W. Montrose Avenue , Suite 2
(Address)
Norridge, IL 60706
(City/State and Zip code)
For further information concerning this matter, please call:  Maricela Guzman at (773 ) 704-7820 or 708-452-8422 5
Maricela Guzman at (773 ) 704-7820 or 708-452-8423
(Name of Person) at (Area Code & Daytime Telephone Number)
STREET ADDRESS:  Registration Section  MAILING ADDRESS:  Registration Section
Division of Corporations Division of Corporations
409 E. Gaines St.  Tallahassee, FL 32399  P.O. Box 6327  Tallahassee, FL 32314
Tallahassee, FL 32399 Tallahassee, FL 32314
Enclosed is a check for the following amount:
S70.00 Filing Fee S78.75 Filing Fee & S78.75 Filing Fee & Certificate of Status Certified Copy 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.

	lable in Florida, enter alt	ernate corporate n	ame ado	opted for	the purpose of	transacti	ng business	in Florid	a)
	aware under the law of which	it is incorporated)	_3	81-	0580991 (FEI num	her if ann	licable)		<u> </u>
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	e of incorporation)		5		erpetual Year corp. w		a eviet or "a		<del></del> .
n/a	7		(1	Juanon	rear corp. w	III OCASC 0		cipetuai	,
117 a	<del></del>		, 1-4						
		ut transacted busine NS 607,1501 & 60					ity)		
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		(Principal office							
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		•						SHI-	70 [
To	originate/bro	ker reside	entia	ıl mo	rtgages.			PS	-≇- 
(Purpose	s) of corporation authoric	zed in home state	or count	ry to be	carried out in s	tate of Fl	orida)	82	, .
Name and stre	et address of Florida re	egistered agent:	(P.O. E	ox NO	T acceptable)	ţ		DA	
	CT CORPORA		•						
Name:		<del></del>				. 1.	•	•	
	1200 Pine	Island Roa	g		4.	<u>.</u> :			•
ffice Address:									
ffice Address:	Temptation			~	35	324			
ffice Address:	Temptation	City)	٠ .	<u>,</u> , Flo	ida 33 (Zip coo	324	••		

- 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:

## AFFLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607,1303, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

ı <u>Ulti</u>	nate Financial Corp	oration	<del></del>			
(Unter tune of co	rporation, must include "INCORPO)  rp. "Inc," "Co," or "Corp.")	RATED," "C	OMI'ANY,"	"CORPORATION,		
	the most and as death.			•		
		<u></u>				_
(If rame unavaila)	ole in l'iorida, coter alternate eurpor:	ne name adop	but for the ma	rpose of transmetting	business in Florid	<u>a)</u>
l Dela	vare nder the law of which it is incorpora	3	81-0580	1991	<del>-</del>	
_	-		-	El number, il applic	ubic)	
7	3/2002	5、	perpe	stual		<del></del>
	of incorporation)	(D)	mition: Year	corp. will ecuse to e	xist or "purpeliul"	)
6n/a		· · ·	<del></del>			
	(Date flight immediated by (SEE SECTIONS 607.150)				<b>)</b>	
7. 7601	W. Montrose Avenue	, Suite	2, Norr	idge, IL 6	0706	_
· · · · · · · · · · · · · · · · · · ·	(Principal of	linca address)				_
7601	W. Montrose Avenue,	Suite	2, Nort	idge, IL	60706	
	(Current ma)	iling address)			•	•
ir		المالية المعادلة الم				
17,	iginate/broker resi					1
, , ,	-				 	755 <b>P</b>
9. Name and street	address of Florida registered age	nt: (P.O Bo	x <u>NOT</u> acce	bupie)	<u>.</u> .	
Name:	CT CORPORATION				3	きゅう コ
Office Address:	1200 Pine Island	Road			,	18 PM 4: 01
	Temptation		. Florida	33324		四年 建
	(Ciŋ/)		(	Zip code)		
10. Registered age	nt's acceptance:					<b>温台</b>
Having been named	l ax registered agent and to acce					<b>र</b> इतिहरू
	pplication, I haveby accept the e- aply with the provisions of all sta					
	ith and accept the obligations of					
	11 101	n/				
	Develope 1 1	Li-				
<del></del>	Laurace.	accord,		Beverioe		
1	(Registered appeal's sig	-		Assistant		
11. Attached is a cel	rtaficate of existence duly authori	ticated, not re	iore than 90	days prior to deliv	ery of this appli-	cation to

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. DIRE	CTORS
Chairman:	the state of the s
Address: ,_	
Vice Chair	man:
Address: _	
Director: _	Maricela Guzman
	863 Brentwood Ct, Bensenville, IL 60106
_	
Director: _	
Address: _	- The Control of th
B. OFFI	
President:	Maricela Guzman
Address: _	863 Brentwood Ct, Bensenville, IL 60106
Vice Presid	lent:
Address: _	
<del>-</del>	
Secretary:	Maricela Guzman
Address: _	863 Brentwood Ct, Bensenville, II. 60106
Treasurer:	The second secon
Address: _	

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

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

Maricela Guzman, President & Secretary

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



#### To all to whom these Presents Shall Comes Greeting:

I, Jesse White, Secretary of State of the State of Illingis,

hereby certify that IN THE STATE OF DELAWARE AND LICENSED TO TRANSACT BUSINESS IN THIS STATE ON JANUARY 29, 2003, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE FILING OF ANNUAL REPORTS AND PAYMENT OF FRANCHISE TAXES, AND IS AT THIS TIME A FOREIGN CORPORATION IN GOOD STANDING AND AUTHORIZED TO TRANSACT BUSINESS IN THE STATE OF ILLINOIS\*\*\*\*\*\*\*\*\*



### In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 12TH

day of

OCTOBER

A.D.

2004