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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : CORPDIRECT AGENTS, INC.

Account Number : 110450000714 Phone : (850)222-1173 Fax Number : (850)224-1640

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FOREIGN PROFIT QUALIFICATION

BROOKFIELD HOME LOANS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70,00

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Sponsor and party

Component filing

RUNIR ARROWN HAID

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.

ļ.	(Enter name of corporation; must include "INCORPORATED,"	" "PORTELNY " "COPPODATION"	_		
	"lnc," "Co.," "Corp," "lnc," "Co," or "Corp.")	COM Will Commentary			
	•				
	(If name unavailable in Florida, enter alternate corporate name a	adopted for the purpose of transacting business in Florid	n)		
		20-0719207			
	(State or country under the law of which it is incorporated)	(FEI number, if applicable)			
4.		Perpotual			
	(Date of incorporation)	(Duration: Year corp. will couse to exist or "perposual"	ን		
	Upon Qualification		_		
	(Date first transacted business in Florida. If corporation has not (SHE SECTIONS 607, 150).	: transacted business in Ploride, Insert "upon qualification , 607.1502 and \$17.155, F.S.)	a.")	•	
7.	7601 France Avenue South #235, Edins, MR 554: (Principal office addr				
	,				
	7601 France Avenue South #235, Edina, MN 5845 (Current mailing adde		-		
	\				
8.	Originating mortgage loans		<u></u>	0	
	(Purpose(s) of corporation authorized in home state or co	untry 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)	3	AON 70	Maria Santa
				12	
	Name: RRAI Bosvides, Inc.				
0	ffice Address: 526 B. Park Avenue			PH	, 3 d
	Tallahasada	, Florida 32301	<u>ر</u> :	F	"A SEASON P
	(City)	(Zip code)	8	կ։ 24	
11). Registered agent's acceptance:		1> ' '		
, -		_			

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 previsions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the abligations of my position as registered agent.

> NRAI Services, Inc. (Registered agent's signature)

Michael Mirrione, Assistant Secretary

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:

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A. DIRECTORS
Chairman: Michael Sampson
Address: 7601 France Avenue South #235
Edina, MR 55435
Vice Chairman:
Address:
Director:
Address:
Director:
, , , , , , , , , , , , , , , , , , ,
T. OUTWOTES
B. OFFICERS
President: Micheel Sampson
Address: 7601 France Avenue South #235
Edina, MN 58435
Vios President:
Addrese:
Scorotary:
Address:
Treasurer:
Address:
NOTE: If necessary, you may attach an addicadom to the application listing additional officers and/or directors.
13. (Signature of Director or Officer listed in number 12 of the application)

14. Michael Sampson, President (Typed or printed name and capacity of person signing application)
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state of Minnesota

SECRETARY OF STATE

Certificate of Good Standing

I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: Brookfield Home Loans Inc.

Date Formed: 02/10/2004

Chapter Governed By: 302A

This certificate has been issued on 11/05/04.

Mary Hiffmans State.