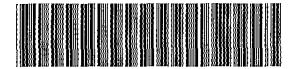
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## TRANSMITTAL LETTER

	on Section of Corporations				·	
SUBJECT:	Apex	Home	Loans,	Inc.		
	(	Name of co	orporation - m	ust include suffi:	<u>x)</u>	
Dear Sir or Madar	m:					
The enclosed "Ap "Certificate of Ex transact business i	istence," and chec	gn Corpora k are submi	tion for Auth tted to registe	orization to Transer the above refer	sact Business in Florenced foreign corp	orida," oration to
Please return all c	orrespondence co	ncerning thi	s matter to th	e following:		
	Gates	_		_		
	<u> </u>	(1	Name of Pers	on)		
Proex H	one Loans	•			-	
	<u> </u>		Firm/Compar	ıy)	. T	
10411 1	notor Cita	n DC	SUF	te 350		
			(Address)	te 350		
Bother	da, mo	2	0817			
	30 -(1		y/State and Z	ip code)		
			-			
For further inform	nation concerning	this matter,	please call:			
Cric (Name of	) Gates f Person)	at (_	30 L) (Area Code	365-31 & Daytime Tele	phone Number	8- 467 Senz
Registrati Division o 409 E. Ga	ADDRESS: ion Section of Corporations aines St. ee, FL 32399		  	Registration Division of P.O. Box 63	Corporations ====================================	5 P 2: 24
Enclosed is a chec	ck for the followir	g amount:				
☐ \$70.00 Filing I		Filing Fee icate of Stat		3.75 Filing Fee & rtified Copy		of 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. (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) (State or country under the law of which it is incorporated)

3. 52-2075-704

(FEI number, if applicable) (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Principal office address) Same (Current mailing address) 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 NOT acceptable) Name: Office Address: 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.

- 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. DÍRECTORS						
Chairman: W/A	. <u> </u>	<u> </u>	nd one or one o			
Address:		<u> </u>	<u> </u>	<u>: -</u>		
	<u> </u>		_ 15	<u> </u>	<u> </u>	_ = - 44.
Vice Chairman: NA					7	<u>*</u> -
Address:		<u></u>	<del>i</del> i:		<u></u> :	
	. ,	<u> </u>	<del>-</del> -			
Director: NA	. r. s ( = <del>             </del> +	<del></del>	<u> </u>	<u> </u>	-2	<u>-, ii ,</u> -
Address:	<u> </u>	<u> </u>		·	<u>۔ بر</u>	_ 
	. <u> </u>	<u> </u>		<u></u>	<u> </u>	<u> </u>
Director: NA	· <u>" </u>	:	<u> </u>			
Address:	<u> </u>	<u> </u>		<u>.                                    </u>	· <u>-</u>	
		<u> </u>		<u> </u>	<u>.</u>	
B. OFFICERS						
President: Eric O Gates				<u> 2+1'                                   </u>	<u> </u>	
Address: 10411 Motor City Dr.	Suite	350	·			
Bethesda, MD 20817					<b>3</b>	<u></u>
Vice President: Craig E. Streat	<u> </u>	, 		E E	유	
Address: Samo	<u> </u>		marate over 1 12		တ်	m
	-237			- CO	ν, Ω	
Secretary: Craig & Strent	<u> </u>		·		24	· -
Address: Same	. <u>= : = :                              </u>			<u>,                                    </u>	<u> </u>	·•,
Treasurer: Eric D. Gates		<u> </u>	<u></u>		<u></u>	<u> </u>
Address: Same	₹6.	· <u></u>	* * * * * * * * * * * * * * * * * * *	· 		<u> </u>
			·			
NOTE: If necessary, you may attach an addendum to the	application	n listing additio	onal officers a	nd/or dire	ctors.	
13. (Signature of Director or Officer lis	sted in num	ber 12 of the a	oplication)	: v:#5+ ·		<u> </u>
14. Eric D Gates.		dent			, F =	
(Typed or printed name and capa-			lication)	·	-	

## STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT APEX HOME LOANS, INC. IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS APRIL 05, 2005.

Paul B. Anderson Charter Division

Faul B. Undron

SECRETARY OF STATE



301 West Preston Street, Baltimore, Maryland 21201
Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941
MRS (Maryland Relay Service) (800) 735-2258 TT/Voice
Fax (410) 333-7097