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(((H050001305873)))

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To:

Division of Corporations

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From:

Account Name : CORPDIRECT AGENTS, INC.

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

0173.3841

FOREIGN PROFIT QUALIFICATION

CIRCLE MORTGAGE GROUP, CORP.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
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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.

| • | gage Group, Corp. If corporation; must include "INCORPORAT | ED | " "COMPANY." "CORPORATION." | |
|---|---|-------------|--|----------|
| "Inc.," "Co.," | "Corp," "Inc," "Co." or "Corp.") | | | |
| | | | | : |
| (If name unav | ailable in Fiorida, enter alternate corporate n | ame | adopted for the purpose of transacting business in Florida) | |
| 2. New Jersey | | _ 3. | 20 - 2699756 | |
| (State or count | ry under the law of which it is incorporated) | | (FEI number, if applicable) | |
| 4. 04/08/2005 | | 5. | Perpetual | |
| (D | ate of incorporation) | • | (Duration: Year corp. will cease to exist or "perpetual") | |
| 5, Upon Qualifi | cation | | and the second s | |
| | sacted business in Florida. If corporation has | | transacted business in Florida, insert "upon qualification.") | • . |
| | (SEE SECTIONS 607.1 | 501 | , 607.1502 and 817.155, F.S.) | |
| , 5 Waller Aver | nue, Suite #303, White Plains, New York | . 10 | 601 | |
| | (Principal office | add | ress) 20 | |
| 5 Waller Avel | nue, Suite #303, White Plains, New York | . 16 | 0601 | - |
| | (Current mailing | add | (as) DE P | 3 |
| | | | 72 | Eight. |
| · ——— | nding and Brokering | <u> </u> | <u> </u> | I |
| (Ригрозе | c(s) of corporation authorized in home state of | r co | untry to be carried out in state of Florida) | |
| . Name and <u>st</u> | reet address of Florida registered agen | it: (| (P.O. Box or Mail Drop Box NOT acceptable) | * 5** |
| | | | O | |
| Name: | License and Compliance Resource, LLC | | — Loz-7719 副 S | , } |
| Office Address: | 245 Gray Street | | C02 , | |
| | | | , | |
| | West Palm Beach (City) | | , Florida 33405 (Zip code) | |
| | (Chy) | | (Lip code) | |
| | agent's acceptance: | | | |
| laving been na | med as registered agent and to accept se | rvic | e of process for the above stated corporation at the plat | e |
| esignatea in thi urther aproe ia | is application, I nereby accept the appoil comply with the pravisions of all statute | rtin Cre | ent as registered agent and agree to act in this capacity lative to the proper and complete performance of my di | .] |
| nd I am familic | ir with and accept the obligations of my | pos | ition as registered agent. | 11165. |
| | License and Compliance Resour | ··· | uc | |
| | | ~e | , LLC | |
| _ | By: May L | | | |
| • | (Registered agent's signatu | re) | | |
| 1 Attached is a | certificate of existence duly authenticate | eri r | not more than 90 days prior to delivery of this application | |

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: Dale R. Siegel | | | |
| Address: 6 Waller Avenue, Suite #303, White Plains, New York 10601 | <u> </u> | | |
| | | | |
| Vice Chairman: N/A | <u> </u> | | |
| Address: N/A | | · | |
| | | | |
| Director: Date R. Siegel | | | |
| Address: 5 Waller Avenue, Suite #303, White Plains, New York 10601 | | | |
| | 20 | <u></u> | , |
| Director: N/A | <u> </u> | | : |
| Address: N/A | | 22 | |
| | 설수 | | * |
| B. OFFICERS | 71 | ~ ! ~ ! | - |
| President: Dale R. Siegel | 82 | 0 | |
| Address: 5 Waller Avenue, Suite #303, White Plains, New York 10601 | ĎΑ | | |
| | | | |
| Vice President: N/A | | | |
| Address: N/A | | | |
| | | · · · · | |
| Secretary: Dale R. Siegel | . , | | |
| Address: 5 Waller Avenue, Suite #303, White Plains, New York 10601 | | | |
| Treasurer: Dale R. Siegel | | | |
| Address: 5 Waller Avenue, Suite #303, White Plains, New York 10601 | | | |
| | | | |
| NOTE: If necessar, you may attach an addendum to the application listing additional officers and/or di | rectors. | 40 | |
| 13. (Signature of Director of Officer listed in number 12 of the application) | | | |
| Dula B. Stand Dunident/Trans. wor/Speciates //Discotes | | | |
| (Typed or printed name and capacity of person signing application) | | | |

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STATE OF NEW JERSEY DEPARTMENT OF TREASURY SHORT FORM STANDING

CIRCLE MORTGAGE GROUP, CORP. 0100943579

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on April 8, 2005.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Dale Siegel. 2000 Linwood Ave 22c Fort Lee, NJ 07024

Continued on next page ...

SECRETALL OF STALE

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STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

CIRCLE MORTGAGE GROUP, CORP.

IN TESTIMONY WHEREOF, I have

hereunto set my hand and affixed my Official Seal at Trenton, this 23rd day of May, 2005

John It ilamen

John E McCormac, CPA State Treasurer SECRICIANY OF STATE