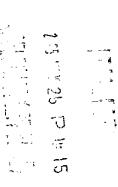
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(R	Requestor's Name)	
(A	Address)	
(A	ddress)	
(0	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(B	Business Entity Nan	ne)
Œ	Occument Number)	
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Special Instructions to	o Filing Officer:	
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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: MHL Funding COSP
SUBJECT: MHL Funding Corp (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:
Delana Da die
(Name of Person)
Mortagne IT. Inc
(Firm/Company)
33 Marden Lane 7th Floor
(Address)
New York, N.Y 10038
New York, N.Y 10038 (City/State and Zip code)
For further information concerning this matter, please call:
Delano Dourdie at (212) 651 7647
(Name of Person) (Area Code & Daytime Telephone Number)
STREET ADDRESS: MAILING ADDRESS:
Registration Section Registration Section Division of Corporations Division of Corporations
409 E. Gaines St. P.O. Box 6327
Tallahassee, FL 32399 Tallahassee, FL 32314
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$\Bigcup \\$78.75 Filing Fee \& \Bigcup \\$78.75 Filing Fee \& \Bigcup \\$78.75 Filing Fee \& \Bigcup \\$20.00 Certificate of Status \& \Bigcup \\$20.00 Certificate of Status \&20.00 Certificate of Statu

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	E WITH SECTION 607.150. REIGN CORPORATION TO		•			\mathcal{O}
1. MH	1 Francisco C	.a.=0				
(Enter name of c	orporation; must include "INC orp," "Inc," "Co," or "Corp.")	CORPORATED," "(COMPANY," "C	ORPORATION	N,"	
(If name unavail	able in Florida, enter alternate	corporate name ado	pted for the purpo	ose of transacting	ng business in Flo	rida)
2 Delan	۵.۲	3	20-25	80554	-	
(State or country	under the law of which it is in	corporated)	(FEI	number, if app	licable)	
4. 3/15	8/2005	5	Perpetu	ا ما		
(Date	of incorporation)	(E	ouration: Year con	rp. will cease to	exist or "perpetu	al")
6				\n		<u> </u>
	(Date first trans) (SEE SECTIONS 60)	acted business in Flo 7.1501 & 607.1502,			ity)	
7. 33 M	uiden Lane 7 ^t (Prin	L Floor acipal office address	New Yor	K.N.Y	10038	
	(Cur	rent mailing address)			
8. Reside	ential Mortages) of corporation authorized in	home state or count	inations ry to be carried or	it in state of Flo	orida)	
9. Name and stree	et address of Florida register	red agent: (P.O. B	ox <u>NOT</u> accept	able)		
Name:	CT Cosporat	ion Syste	m.			
Office Address:	1200 South	Pine Island	_Rd		,	
	Plantation (City)			3324		
	gent's acceptance:				26	
designated in this further agree to c	ned as registered agent and application, I hereby accelonably with the provisions of with and accept the obligations.	ot the appointmen of all statutes relat	t as registered a live to the prope	gent and agre r and complet	e to act in this	capacity. 1
	77	9		el J. Mito		
	(Registéred ag	gent's signature)	₩ 5% ○	tatil occi	c lai y	

- 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:

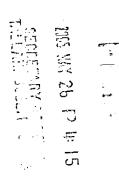
A. DIRECTORS Chairman: _ Address: _ Vice Chairman: Address: __ Director: Bob Gula Address: 33 Maiden Lane New York. N.Y 10038 Director: Phil Kukufka Address: 33 Maiden Lane New York. N.Y 10038 **B. OFFICERS** President: Glenn Mouridy Vice President: _ Sean _ McGrath Address: 33 Maiden Lane New York N.Y 10038____ Secretary: John Cuti Address: 33 Maiden Lane New York N. Y 10088 Treasurer: Don Epstein Address: 33: Maiden Lane New York N. Y 100,38 / NOTE: If necessary, you may attach an addending to the application listing additional officers and/or directors. 13. _____ (Signature of Director of Office listed in number 12 of the application) (Typed or printed name and capacity of person signing application)

Delaware

PAGE 7

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MHL FUNDING CORP." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTH DAY OF MAY, A.D. 2005.





Darriet Smith Windsor, Secretary of State

AUTHENTICATION: 3857124

DATE: 05-04-05

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