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To:

Division of Corporations

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From:

Account Name

: BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

M. HODGES

Account Number: 075350000353

(212) 431-5000

Fax Number

: (212)431-1441

FOREIGN PROFIT QUALIFICATION

D & N MORTGAGE CONSULTANTS LTD., INC.

Certificate of Status	0
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7/28/2005

Jul 28 2005 14:43

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SURMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. D & N MORTGAGE CONSULTANTS LTD., INC. (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) (FEI number, if applicable) (Duration: Year corp. will cease to exist or "perpetual") (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 181 SOUTH FRANKLIN AVE., VALLEY STREAM, NY 11581 (Principal office address) SAME AS THE ABOVE (Current mailing address) CORRESPONDENT MORTGAGE LENDER (Purpose(s) 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) BLUMBERGEXCELSIOR CORPORATE SERVICES, INC. Name: 4435 OLD WINTER GARDEN RD Office Address: ORLANDO Florida 32811 (City) (Zip code) 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.

JOSE MOJICA, ASST. SECY. 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:	·
Address:	i
Vice Chairman;	
Address:	
Director: STEVEN BORENSTEIN	
Address: 181 SOUTH FRANKLIN AVE., VALLEY STREAM, NY 11581	· · · · · · · · · · · · · · · · · · ·
Director: MARK ALSOFROM	
Address: 181 SOUTH FRANKLIN AVE., VALLEY STREAM, NY 11581	
	:
B. OFFICERS	
President: STEVEN BORENSTEIN	
Address: 181 SOUTH FRANKLIN AVE., VALLEY STREAM, NY 11581	
Vice President: MARK ALSOFROM	
Address: 181 SOUTH FRANKLIN AVE., VALLEY STREAM, NY 11581	
Sceretary:	<u></u>
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/o	r directors.
13. (Signature of Director or Officer listed in number 12 of the application)	•
14. STEVEN BORENSTEIN, PRESIDENT	
(Typed or printed name and capacity of person signing application)	

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State of New York Department of State | ss

I hereby certify, that the Certificate of Incorporation of D & N MORTGAGE CONSULTANTS LTD. was filed on 04/27/2004, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



Witness my hand and the official seal of the Department of State at the City of Albany, this 27th day of July two thousand and five.

Secretary of State

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