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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Empire Mortage X. I (Name of corporate	tion - must include suffix)	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for "Certificate of Existence," and check are submitted to transact business in Florida.	or Authorization to Transact Business in Florida," or register the above referenced foreign corporation	n to
Please return all correspondence concerning this matt	er to the following:	
Karen Ches		
(Name	of Person)	
Empire Mortgage X, Inc. (Firm/C	Company)	
EP.3 11350 McCornick RQ	Suite 502	
(Ad	Idress)	
Hunt Valley, MD 21031	2005 SEC ALL,	
(City/State	e and Zip code)	
	ASS I	O to desire trappe
For further information concerning this matter, please	e call:	
	7	
	1785-0092 X 138 0	
(Name of Person) (Area	a Code & Daytime Telephone Number)	
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following amount:		
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Sertificate of Stan Certified Copy	



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 22, 2005

KAREN CHES EMPIRE MORTGAGE X, INC. EP3 11350 MCCORMICK RD., SUITE 502 HUNT VALLEY, MD 21031

SUBJECT: EMPIRE MORTGAGE X, INC.

Ref. Number: W05000039679

We have received your document for EMPIRE MORTGAGE X, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Diane Cushing Document Specialist

Letter Number: 205A00053259

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.

1	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	
2.	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	
4.	(Date of incorporation) 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")	
 7. 	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) EP-3 11350 Mc(nick RO. Suite 502 (Principal office address)	
	Hunt Valley, MD 21030 (Current mailing address)	
	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Paracoro Tryot Porcel	
O	office Address: 236 East 6th Ave. Tallahassee, , Florida 32363 (City) (Zip code)	
H de fu	0. Registered agent's acceptance: laving been named as registered agent and to accept service of process for the above stated corporation at the pla esignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacia wither agree to comply with the provisions of all statutes relative to the proper and complete performance of my a and I am familiar with and accept the obligations of my position as registered agent.	ty. I

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.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors:

STATE OF FLORIDA

REGISTERED AGENT CONSENT FORM

DATE:

ENTITY NAME:

Empho Mortgage X, The

REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 236 East 6th Avenue Tallahassee, FL 32303

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in that capacity for the above-referenced entity until removed or signation is submitted in accordance with the Florida Revised Statutes.

Denise Zollner, Assistant Secretary

Paracorp Incorporated

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A. DIRECTORS
Chairman: Charles Lott
Address: EP.3 11350 McCosmick RO Swife 502
Hunt Valley, MD 21030
Vice Chairman: Gary Olschansky
Address: EP 3 1350 McCormick RO Suite 502
Hunt Valley, MD 21031
Director:
Address:
Director: Carolyn Olschansky
Address: EP-3 11350 McCornick RO. Suit 500
Hunt Valley, MD 21031
B. OFFICERS
President: Charles Lott
Address: EP-3 11350 McCormick Rd. Suik 500 mil
Hunt Valley, MD 21031
Vice President: Gary Olschansky
Address: EP. 3 11350 McCormick RO Suit 502
Hunt Valley, MD 21031
Secretary: Carolyn Olschansky
Secretary: Carolyn Olschansky Address: EP-3 11350 Mk Cormick Pol Suite 502 Hunt Valley, MD 2103
Treasurer: Utalles Lott
Address: EP-3 11350 McCormick Rd Suite 502 Unit Valley, MD
2103/
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
(Signature of Director or Officer listed in number 12 of the application)
14. Charles Lott
(Typed or printed name and capacity of person signing application)

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 EMPIRE MORTGAGE X, 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 SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND ABALTIMORE ON THIS SEPTEMBER 26, 2005.

Paul B. Anderson Charter Division 5 OCT -1 P 3: 05

CHEARY OF STATE

ANSSEE, FLOAID



301 West Preston Street, Baltimore, Maryland 21201
Telephone Balto. Metro (410) 767-1344 / Outside Balto. Metro (888) 246-5941
MRS (Maryland Relay Service) (800) 735-2258 TT/Voice
Fax (410)333-7097

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