F05000006334

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		į
	-	





300060435143

10/17/05--01038--005 **70,00

ESPANA CASINE

105-6334

	•
(Requestor's Name) (Address)	
(Address) (City/State/Zip/Phone #)	200059653042
PICK-UP WAIT MAIL (Business Entity Name)	
(Document Number) Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	- Wrong does - No # for For - Return FR
Office Use Only	5-6334



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 3, 2005

HAKIM ALI 10001 DEMISONI AVE CLEVELAND, OH 44102

SUBJECT: HKM MORTGAGE CORPORATION

Ref. Number: W05000045441

We have received your document for HKM MORTGAGE CORPORATION, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$70.00.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6020.

Tammi Cline Document Specialist

Letter Number: 405A00059878



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 19, 2005

HAKIM ALI 10001 DEMISONI AVE CLEVELAND, OH 44102

SUBJECT: HKM MORTGAGE CORPORATION

Ref. Number: W05000045441

We have received your document for HKM MORTGAGE CORPORATION and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

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) 245-6020.

Tammi Cline Document Specialist

Letter Number: 605A00063632



Secretary of State

October 3, 2005

HAKIM ALI 10001 DEMISONI AVE CLEVELAND, OH 44102

SUBJECT: HKM MORTGAGE CORPORATION

Ref. Number: W05000045441

We have received your document for HKM MORTGAGE CORPORATION, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$70.00.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6020.

Tammi Cline Document Specialist

Letter Number: 405A00059878

COVER LETTER

FO: Registration Section Division of Corporations	
SUBJECT: HKM Mortgage 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 ransact business in Florida.	
Please return all correspondence concerning this matter to the following:	
Habiem AL.	
(Name of Person)	
Haki'm AL, (Name of Person) HKM Mortgage Cap. (Pirm/Company)	
(Pirm/Company)	
10001 Denison Ave	
(Address)	
Clove and, OH 44102	
(City/State and Zip code)	
For further information concerning this matter, please call:	
(Name of Person) at (216) 939-9599 (Area Code & Daytime Telephone Number)	الله الله الله الله الله الله الله الله
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 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 \$\bigcup \$78.75 Filing Fee & \$\bigcup \$78.75 Filing Fee & \$\bigcup \$87.50 Filing Fee, \$\text{Certificate of Status}\$\$\$ Certified Copy \$\text{Certified Copy}\$\$\$\$ Certified Copy	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE V REGISTER A FORE	WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO EIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	
UVN		
(Enter name of corp	1 Maria Corp. rporation; must include (INCORPORATED," "COMPANY," "CORPORATION," rp," "Inc," "Co," or "Corp.")	
(If name unavailab	M Tax + Marigage Copole in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	
(State or country un	H 3. 3. 14-78 NA Inder the law of which it is incorporated) (FEI number, if applicable)	
4 2_1	1941 5 PerceThal	
	of incorporation) 5. Perpo Tual (Duration: Year corp. will cease to exist or "perpetual")	
6	(Date first transacted business in Florida, if prior to registration)	
	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
7	(Principal office address)	
10001	Denison Ace Clevelend, OH 44102 (Current mailing address)	
8. Origina (Purpose(s)	To mortgage Loans for residential & commercial Real of corporation authorized in home state or country to be carried out in state of Florida)	'esta
	address of Florida registered agent: (P.O. Box NOT acceptable)	أ جد حنت
	Anas Amireh	الله المامية الله المامية
Office Address:	6111 N.W. 55 Lane	a Maria Maria
	Tanorae , Florida 333/9 (City) (Zip code)	
10. Registered age Having been named designated in this ap further agree to con		Ĭ,
	Aws Amreh (Registered agent's signature)	

- 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: W/
Address:
Address.
Director: L/A
Address:
Director:
Address:
B. OFFICERS
President: Hakim ALi
Address: 23380 Sharon Dv.
N. Olmsted, OH 44070
Vice President: 50me
the state of the s
Address: Same
Secretary: Aman: AL,
Address: 23780 Sharon Dr. N. Olmsted OH 45000
Treasurer: Haki'h Ah
Address: 23360 Sharm De N. Olmsted, CH 44090
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. (Signature of Director or Officer listed in number 12 of the application)
(Signature of Director of Officer fisied in number 12 of the application)
(Typed or printed name and capacity of person signing application)

United States of America State of Ohio Office of the Secretary of State

I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show HKM CHECKTAX POSTAL CORP., an Ohio corporation, Charter No. 873796, having its principal location in Cleveland, County of Cuyahoga, was incorporated on June 08, 1994 and is currently in GOOD STANDING upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 25th day of October, A.D. 2005

Ohio Secretary of State

Validation Number: V200529804A5DB