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W05-51507
J BRYAN NOV 17 2005

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: COMPLETE HOME MORTGAGE 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:

JOHN KOUMANIS
(Name of Person)
COMPLETE HOME MORTGAGE CORP.
(Firm/Company)
535 BROAD HOLLOW ROAD Suite B9
(Address)
MELVILLE NY 11747
(City/State and Zip code)

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For further information concerning this matter, please call:

John Koumanis at (888) 222-4333
(Name of Person) (Area Code & Daytime Telephone Number)

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 ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

November 17, 2005

JOHN KOUIMANIS
COMPLETE HOME MORTGAGE CORP.
535 BROAD HOLLOW ROAD SUITE B9
MELVILLE, NY 11747

SUBJECT: COMPLETE HOME MORTGAGE CORP.
Ref. Number: W05000051507

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We have received your document for COMPLETE HOME MORTGAGE CORP. 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 document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 505A00068128

**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. COMPLETE HOME MORTGAGE CORP.

(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)

2. NEW YORK

(State or country under the law of which it is incorporated)

3.

(FEI number, if applicable)

4. 2/2000

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6.

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 535 BROAD HOLLOW ROAD, MELVILLE NY 11747 Suite B9

(Principal office address)

535 BROAD HOLLOW ROAD, MELVILLE NY 11747 Suite B9.

(Current mailing address)

8. MORTGAGE BROKER

(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)

Name: NRAI Services, Inc.

Office Address: 2731 Executive Park Drive Suite 4

Weston

(City)

Florida 33331

(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.

Lisa Reeves, Agent Dec 11/28/05
(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: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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B. OFFICERS

President: John Kouimianis

Address: 535 Broadhollow Rd Ste. B9
Melville NY 11747

Vice President: Glenn Dube

Address: 535 Broad Hollow Rd Suite B9
Melville NY 11747

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____ / President
(Signature of Director or Officer listed in number 12 of the application)

14. John Kouimianis / President
(Typed or printed name and capacity of person signing application)

COMPLETE HOME MORTGAGE CORP.

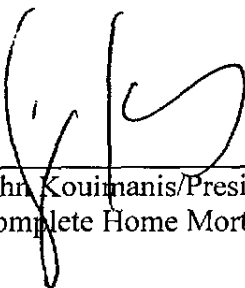
535 Broad hollow Road Suite B-9 Melville, NY 11747 631-249-3100 Fax 631-249-2315

Registered Mortgage Broker – NYS Banking Department

11/28/05

To Whom It May Concern:

This letter is to certify that I hereby am familiar with and accept the duties and responsibilities of NRAI Services, Inc.



John Kouimmanis/President
Complete Home Mortgage Corp.

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State of New York
Department of State } ss:

I hereby certify, that the Certificate of Incorporation of COMPLETE HOME MORTGAGE CORP. was filed on 02/23/2000, under the name of CAPITAL ONE CONSULTANTS CORP., 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.

A Certificate of Amendment CAPITAL ONE CONSULTANTS CORP., changing its name to COMPLETE HOME MORTGAGE CORP., was filed 10/18/2004.

*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 21st day of October two
thousand and five.*



Special Deputy Secretary of State

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OFFICE OF CORPORATIONS
TALLAHASSEE, FLORIDA