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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Hampton JAN 25 2006

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Wealth Mortgage Concepts, Inc
(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:

Raymond A. DeStefanis
(Name of Person)
Wealth Mortgage Concepts, Inc.
(Firm/Company)
Two Regency Plaza, Suite 12
(Address)
Providence, R.I. 02903
(City/State and Zip code)

For further information concerning this matter, please call:

Raymond A. DeStefanis at 401, 490-9333 or 401-641-0911
(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

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. Wealth Mortgage Concepts, 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)

2. Rhode Island 3. 72-1604125
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 7-14-2005 5. Perpetual
(Date of incorporation) (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. Two Regency Plaza Suite 12 Providence, R.I. 02903
(Principal office address)
1395 Atwood Avenue Suite 114 Johnston, R.I. 02919
(Current mailing address)

8. Mortgage Origination
(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: Vincent Pallozzi

Office Address: 9185 Bay Pointe Circle
West Palm Beach, FL, Florida 33411
(City) (Zip code)

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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.

Vincent Pallozzi
(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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TALLAHASSEE, FLORIDA

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B. OFFICERS

President: SUSAN M. DeStefanis

Address: 94 Bradley Street Providence, R.I. 02908

Vice President: _____

Address: _____

Secretary: LYNNE M. DiBIASE

Address: 3 Tabor Street Cranston, R.I. 02920

Treasurer: LAWRENCE J. Mancini

Address: 17 Rimwood Drive Smithfield, R.I. 02917

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

13. Susan DeStefanis

(Signature of Director or Officer listed in number 12 of the application)

14. SUSAN DeStefanis, President

(Typed or printed name and capacity of person signing application)



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown
Secretary of State

The Office of the Secretary of State of the State of Rhode Island and Providence Plantations, HEREBY CERTIFIES, that

WEALTH MORTGAGE CONCEPTS, INC.

a Rhode Island corporation, filed articles of incorporation in this office on the 14th day of July, 2005; and

IT IS FURTHER CERTIFIED that as of this date said corporation is duly organized and existing under and by virtue of the laws of the State of Rhode Island and is in good standing according to the records of this office.

SIGNED AND SEALED this eighteenth
day of January, A.D. 2006.

Matthew Brown

Secretary of State

BY *Andrea M. Lianese*

