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COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: OPTIMAX FINANCIAL INC. Loc OPTIMAY (Name of corporation - must include suffix) HOME				
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: Afforso Milanese (Name of Person)				
OPTIMAX HOME LOANS (Firm/Company)				
100 W BRODWAY #720 (Address)				
Glendale CA 91210 (City/State and Zip code)				
For further information concerning this matter, please call:				
Alfonso Milanese at (818) 398-5327 (Name of Person) (Area Code & Daytime Telephone Number)				
STREET/COURIER ADDRESS: MAILING ADDRESS:				
New Filing Section New Filing Section Division of Corporations Division of Corporations				
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301				
Enclosed is a check for the following amount:				
\$70.00 Filing Fee \$78.75 Filing Fee \$\$ \$78.75 Filing Fee \$\$ \$87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy Certified Copy				



February 3, 2006

ALFONSO MILANESE 100 W BROADWAY #720 GLENDALE, CA 91210

SUBJECT: OPTIMAX FINANCIAL INC.

Ref. Number: W06000005492

We have received your document for OPTIMAX FINANCIAL 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 designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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) 245-6955.

Letter Number: 106A00008061

Suzanne Hawkes Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503. FLORIDA STATUTES, THE FOLLOWING IS SUBMERFULTO TO THE STATE OF FLORIDA. AMASSET FLORIDA. AMASSET FLORIDA. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") OPTIMAX HOME LOANS
(If name unavailable in Florids, enter alternate corporate name adopted for the purpose of transacting business in Florida) 2. CALIFORNIA

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

3. 58-2665435

(FEI number, if applicable) (Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 100 8. PROVIDE REAL ESTATE FINGURE OF Florida)

(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) corporation System Name:

Office Address:

Having been named as registered agent and to accept service of process for the above stated corporation at the plan designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacit further agree to comply with the provisions of all statutes relative to the proper and complete performance of my and I am familiar with and accept the obligations of my position as registered agent. Michael J. Smith

Assistant Secretary

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this the Department of State, by the Secretary of State or other official having oustody of corporate records in under the law of which it is incorporated.

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

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA 06 MAR 17 AH	3 ; 10: g
I COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBJECTED TO γ FIGURES IN THE STATE OF FLORIDA. A MASSEL FI	S PAT
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp." "Ine," "Co.," or "Corp.")	(
OPTIMAX HOME LOANS (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) CALIFORNIA 3. 58-2665435	
(State or country under the law of which it is incorporated) 3. 58-2665435 (FEI number, if applicable)	
(Duration: Year corp. will cease to exist or "perpetual")	
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
100 W BROANWAY # 720 Glendale CA 9/12 (Principal office address)	
100 W BROADWAY # 720 Glendale CA 912	219
(Current mailing address)	
PROVIDE REAL ESTATE FINGUACING (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: <u>CT Corporation</u> System	
Office Address: 1200 S. Pine Island Rd.	
Plantation, Florida 33324 (City) (Zip code)	
0. 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.

Michael J. Smith
Assistant Secretary

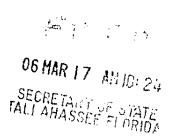
(Registered agent's signature)

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: Alfonso Milanese	06 MAR 17 AM 10: 24
Address: 100 W BROADWAY # 720 Glendale CA 91210	
Vice Chairman;	
Address:	
Director:	
Address:	
Director:	
Address:	
Address: 100 W B20ADWAY # 720	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional 13.	
(Signature of Director or Officer listed in number 12 of the application of the applicati	

State of California Secretary of State



CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, BRUCE McPHERSON, Secretary of State of the State of California, hereby certify:

That on the 6TH day of JUNE, 2001, OPTIMAX FINANCIAL, INC. became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of January 9, 2006.



BRUCE McPHERSON Secretary of State