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(Requestor's Name)		
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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3000	o 44	

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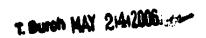


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SECRETARY OF STATE TALLAHASSEE, FLORIDA

2006 MAY 22 PM 2: 3



## **COVER LETTER**

TO: New Filing Section Division of Corporations				
SUBJECT: New World Mortgage Bankers (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:				
(Name of Person)				
New World Mortgage				
1377 Motor Parkway, Suite 403				
(Address)				
Islandia, NY 11749				
(City/State and Zip code)				
For further information concerning this matter, please call:				
Laurie Ragusa at (631) 285-1605 (Name of Person) (Area Code & Daytime Telephone Number)				
(Name of Person) (Area Code & Daytime Telephone Number)				
STREET/COURIER ADDRESS: MAILING ADDRESS:				
New Filing Section  New Filing Section				
Division of Corporations  Clifton Building  Division of Corporations  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 \$\$Certificate of Status \$78.75 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. New World Casital Holdings, Inc.		
(Enter name of corporation; must include "INCORPORATED," "COMPANY," CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")		
New World Mortgage Bankers		
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)		
2. New York 3. 33-1129278 (State or country under the law of which it is incorporated) (FEI number, if applicable)		
4. 12-21-2005 (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. 1377 Motor Parkway Suite 403, Islandia, N	Y //	740
1377 Motor Parkway Svite 403, Tslandia, N (Principal office address)  1377 Motor Parkway, Svite 403, Islandia, NY  (Current politing address)	11	149
(Current mailing address)		
8. Mortgage brokerage		
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	2006	
9. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)	Z X	П
Name: Incorp Services, Inc.	22	F
Office Address: 18450 NE 2nd Avenue	2	
Miam. Florida 33/79		<u> </u>
Miam, , Florida 33/79 (Zip code)	32	
10. Registered agent's acceptance:  Having been named as registered agent and to accept service of process for the above stated corporation at the p designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity.		

(Registered agent's signature)

and I am familiar with and accept the obligations of my position as registered agent.

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.

further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties,

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: \_\_\_\_ Vice Chairman: Address: Director: \_\_\_\_ Address: Director: Address: Home: **B. OFFICERS** President: Edward Munteanu Address:

Secretary:

Address:

Treasurer:

Address:

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)

14.

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

Vice President:

Address:

## State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of NEW WORLD CAPITAL HOLDINGS INC. was filed on 12/21/2005, 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.

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 10th day of May two thousand and six.

Special Deputy Secretary of State

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