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FOREIGN PROFIT/NONPROFIT CORPORATION

CONSUMER FUNDING SERVICES CORP.

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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. CONSUMER FUNDING SERVICES CORP.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. OHIO

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

3.

(FEI number, if applicable)

4. 04/08/99

(Date of incorporation)

5.

PERPETUAL

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

6. UPON FILING

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

7. 777 EAST CENTER STREET, MARION OHIO 43302

(Principal office address)

SAME

(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 Dr., Ste 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.

NRAI Services, Inc.

Jui Prolet 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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: GEORGE D. HABER
777 E CENTER ST MARION, OH 43302

Director: _____

Address: ERIC J. SAVIDGE
777 E CENTER ST MARION, OH 43302**B. OFFICERS**

President: _____

Address: GEORGE D. HABER
777 E CENTER ST MARION, OH 43302

Vice President: _____

Address: ERIC J. SAVIDGE
777 E CENTER ST MARION, OH 43302

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. _____

GEORGE D. HABER - PRESIDENT
(Typed or printed name and capacity of person signing application)

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

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TALLAHASSEE, FLORIDA

I, Jennifer Brunner, 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 business entities; that said records show CONSUMER FUNDING SERVICES CORP., an Ohio corporation, Charter No. 1070011, having its principal location in Marion, County of Marion, was incorporated on April 08, 1999 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 23rd day of January, A.D. 2007*

Ohio Secretary of State

Validation Number: V200723J78F04

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