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SECRETARY OF STATE

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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: DISCOUNTRATE, ORG, INC DRA DISCOUNT PATE H) (2
(Name of corporation - must include suffix)	٠.
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:	
MARC A ZI ROGIANNIS AS ATTORNEY (Name of Person)	
MARCA ZIROGIANNIS, ESQ DC (Firm/Company)	
1065 OUS COUNTRY ROAD SUITE 204 (Address)	
WESTBURY, NEW YORK, 1159D (City/State and Zip code)	
For further information concerning this matter, please call:	
MARC A ZIROGIANNIS at (516) 333 - 6200 X 101 (Name of Person) (Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing 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 & \$78.75 Filing Fee & \$87.50 Filing Fee, Certificate of Status Certified Copy 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 CONTRACT STATE STATE OF FLORIDA CONTRACT STATE OF FLORIDA CONTRACT STATE STATE STATE STATE STATE STATE STATE STATE OF FLORIDA CONTRACT STATE STAT
1. DISCOUNTRATE. ORGING (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 3. 20-1305586
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. b. 22.2004 5. PERPETUAL (Duration: Year corp. will cease to exist or "perpetual")
(Date of incorporation) (Duration, Teal corp. with cease to exist of perpetual)
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 41 FAIRLAWN LANE, CENTEREACH, NY 11720 (Principal office address)
(Current mailing address)
8. MORTGAGE BROKERAGE (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: Florida Fling Wearch Services, Inc.
Office Address: 155 Office Plaza Dr., Juite A
Tallahawee, Florida 32301 (City) (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. (Revistered agent's signature)
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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: ___ ANDREW HISCIDSCIA RIAWN LANE CENTEREACH, NY 11720 Vice Chairman: _____ Address: __ Director: Address: **B. OFFICERS** President: ANDREW HISCIOSCIA FAIRLAWN LANE CENTEREACH, NY 11720 Vice President: Address: Secretary: Address: _____ Treasurer: Address: NOTE: If necessary you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) hairman/President 14.

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

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of DISCOUNTRATE.ORG INC. was filed on 06/22/2004, 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.

The Biennial Statement is past due.

I further certify, that no other documents have been filed by such Corporation.



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Witness my hand and the official scal of the Department of State at the City of Albany, this 23rd day of January two thousand and seven.

Daniel Shapiro

Special Deputy Secretary of State

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SECRETARY OF STATE
SECRETARY OF STATE