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Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
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Office Use Only



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SECTETARY OF STATE ALLAHASSEE, FLORIDA

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## **COVER LETTER**

TO: New Filing Section Division of Corporations		
SUBJECT: AMC FIN	adelal ISC.	
	tion - must include suffix)	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for "Certificate of Existence," and check are submitted to transact business in Florida.		
Please return all correspondence concerning this matt	er to the following:	
KIEV F PY	RALTA	
(Name	of Person)	
GNG ENDER	JCIAL INC.	
(Firm/Company)		
902 DC H 10	1#37C.TC	
\\\\\	ldress)	
MACKEDSACK	, NJ, 0+601	
. (City/Stat	e and Zip code)	
For further information concerning this matter, please	e call:	
(Name of Person) at (Area (Area)	a 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 & Certificate of Status	\$78.75 Filing Fee & \$87.50 Filing Fee, Certified Copy Certified Copy Certified Copy	

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.  1. AMC FINANCIAL TOC.
(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 Nous Jersey 322-2801105
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4 1985 5 FYRPETURL
(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)
7.61 HUDSON ST. MACKENSACK PJ. 07601
(Principal office address)
109 FO 10900 ST. MACKEDSACK N. J. 07601
(Current muiling address)
F1 -0 -1 -1 -1 - 1 - 2
8. (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: HWACLA TYRALTA
Office Address: 2351 SW 180Tri AVE.
M. 10 0 00 00 00 00 00 00 00 00 00 00 00 0
(City), Florida 3029
· •/

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.

(Revisiered 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: Kley TERALTH C.E.O.
Chairman: KLEY F ERALTH C. E. D.  Address: 394 BEECH ST. MACKENSACK, NJ. 0760
Vice Chairman:
Address:
Director: CARMEN PERALTH
Address: 394 Beech St. Hackward D. Otbo
Director: AST 2 THE
Address:
B. OFFICERS
President: CARNON TORALTA  Address: 394 Brey St. Flackward, N.J. 07601
Address: 394 BEET ST. FLACK WSACK, NIW-07601
Vice President: KLEY F. P WALTA
Vice President: KLEY F. P. JALTA  Address: 394 BEECH ST. HACKCHSRK NJ. 07601
Secretary: KLEY F. PRANTA
Address: 394 Brech & MACKENSACK, P. D760)
Treasurer: K. Y. G. P. RANTO
Address: 394 beech St. HACKENSACK PJ. 0760
NOTE: If necessary, you may attach an addendum/to the application listing additional officers and/or directors.
13. Bufferold thee fundut
(Signature of Director or Officer listed in number 12 of the application)
14 KLRY & CRAITA, V.T. C.E.O. AND CHAIRMAN
(Typed or printed name and capacity of person signing application)

SRMISC

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STATE OF NEW JERSEY

DEPARTMENT OF TREASURY SECRETARY OF STATE
SHORT FORM STANDING

## AMC FINANCIAL INC.

0100271377

With the Previous or Alternate Name
INVESTORS FUNDING CO., INC. (Previous Name)
AMADORIS MORTGAGE CO., INC. (Previous Name)

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on September 9, 1985.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Carmen Peralta 61 Hudson St. Ste #1 Hackensack, NJ 07601

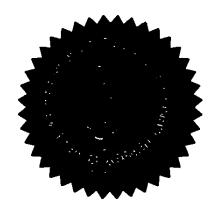
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STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

SECRETARY OF STATE FALLAHASSEE, FLORIDA

AMC FINANCIAL INC.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 13th day of March, 2007

Bradley Abelow

Bradley Abelow State Treasurer