

F96000002536

TRANSMITTAL LETTER

TO: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: CAPITAL FUNDING CORP.
(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:

W96-9802

200001811502
-05/07/96--01110--003
*****70.00 *****70.00

RON SHREFFERON
(Name of Person)

CAPITAL FUNDING CORP.
(Firm/Company)

4821 COCONUT CREEK PKWY, Suite 157
(Address)

COCONUT CREEK FL 33067
(City/State/Zip)

Should you need to call someone concerning this matter, please call:

RON SHREFFERON
(Name of Person)

at (954) 970-5954
(Area Code & Daytime Telephone Number)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95MAY21 AM 11:42

COURIER ADDRESS:

Qualification/Tax Lien Sec.
Division of Corporations
409 E. Gaines St
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

May 8, 1996

RON SHEFFRON
CAPITAL FUNDING CORP.
4821 COCONUT CREEK PKWY SUITE 157
COCONUT CREEK, FL 33067

SUBJECT: CAPITAL FUNDING CORP.
Ref. Number: W96000009802

We have received your document for CAPITAL FUNDING CORP. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

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 (904) 487-6958.

Lee Rivers
Document Examiner

Letter Number: 196A00022495



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

May 15, 1996

**RON SHEFFRON
CAPITAL FUNDING CORP.
4821 COCONUT CREEK PKWY SUITE 157
COCONUT CREEK, FL 33067**

**SUBJECT: CAPITAL FUNDING CORP.
Ref. Number: W96000009802**

We have received your document for CAPITAL FUNDING CORP. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

The name you would like to adopt is also unavailable for use in Florida. Please note that you may make a preliminary check of a name's availability by calling us at the number listed below. Enclosed is a blank name resolution form for your convenience.

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 (904) 487-6958.

Lee Rivers
Document Examiner

Letter Number: 096A00024051

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

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DIVISION OF CORPORATIONS
96 MAY 21 AM 11:42

I, the undersigned RON SHEFFRON, do hereby certify
(Name)

that this Resolution of the Board of Directors of CAPITAL FUNDING CORP.

(Corporate Name)

a corporation duly organized and existing under the laws of the State of NEVADA,

was duly adopted on MAY 10, 19 96.

Be it resolved, that CAPITAL FUNDING CORP.,
(Corporate Name)

organized and existing in the State of NEVADA, hereby adopts the name

CAPITAL FUNDING GROUP CORP. for use in Florida.

Dated: MAY 10, 1996

Ron Sheffron, President
Signature of either Chairman, Vice Chairman or any officer

RON SHEFFRON
Type or print name

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. CAPITAL FUNDING CORP.
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. NEVADA
(State or country under the law of which it is incorporated)
3. FEIN 93-1194128
(FEI number, if applicable)
4. NOV 2 1995
(Date of Incorporation)
5. "PERPETUAL"
(Duration: Year corp. will cease to exist or "perpetual")
6. 2/12/96
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))
7. 4821 COCONUT CREEK PKWY SUITE 157
COCONUT CREEK FL 33067
(Current mailing address)
8. BUSINESS CONSULTATIONS
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)
Name: RON SHEFFRON
Office Address: 4804 NW 22nd St
COCONUT CREEK, FL, Florida, 33067
(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.

Ron Sheffron
(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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DIVISION OF CORPORATIONS
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12. Names and addresses of officers and/or directors: (Street address ONLY- P.O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: LAURA SPARANESE

Address: 4804 NW 22nd St

COCONUT CREEK FL 33067

Director: RON SHERRON

Address: 4804 NW 22nd St

COCONUT CREEK FL 33067

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: RON SHERRON

Address: 4804 NW 22nd St

COCONUT CREEK FL 33067

Vice President: _____

Address: _____

Secretary: LAURA SPARANESE

Address: 4804 NW 22nd St

COCONUT CREEK FL 33067

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors

13. Ron Sherron

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. RON SHERRON, PRES.

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

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SECRETARY OF STATE



CERTIFICATE OF CORPORATE EXISTENCE (EXCLUDING AMENDMENTS)

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to corporations organized under the laws thereof; and am the proper officer to execute this certificate.

I further certify that, at the date of this certificate, **CAPITAL FUNDING CORP.** is a corporation duly organized and existing under and by virtue of the laws of the State of Nevada, and is in good standing in this State.

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DIVISION OF CORPORATIONS
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IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on April 25, 1996.



Dean Heller

Secretary of State

By *James L. Moore*

Certification Clerk