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TRANSMITTAL LETTER

TO: Qualification/Tax Lien Section
Division of Corporations

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SUBJECT: MRM Funding Inc. (NV)
(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:

Robin Butler
(Name of Person)
MRM Funding Inc. (NV)
(Firm/Company)
Box 2922
(Address)
Naples, FL 33939
(City/State/Zip)

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96 MAY 31 AM 10:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Robin Butler at (941) 436-2148
(Name of Person) (Area Code & Daytime Telephone Number)

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

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. MRM Funding Inc. (NV)
(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. 88-0351871
(FBI number, if applicable)
4. 1/12/96
(Date of Incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist, or "perpetual")
6. As of the date of this application
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))
7. Box 2922
Naples, FL 33939
(Current mailing address)
8. Used Mobile Home Dealer
(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: Robin Butler
Office Address: 1191 8th St. South
Naples, Florida, 33939
(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.

Robin Butler
(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.

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: Robin Butler

Address: 1191 8th Street South #14, Naples, FL 33937

Vice Chairman: _____

Address: _____

Director: Boger Kroger

Address: 6130 W. Flamingo #135
Las Vegas, NV 89103

Director: _____

Address: _____

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

President: Robin Butler

Address: 1191 8th St. South #14
Naples, FL 33939

Vice President: Robin Butler

Address: 1191 8th Street South #14
Naples, FL 33939

Secretary: Robin Butler

Address: 1191 8th Street South #14
Naples, FL 33939

Treasurer: Robin Butler

Address: 1191 8th Street South #14
Naples, FL 33939

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

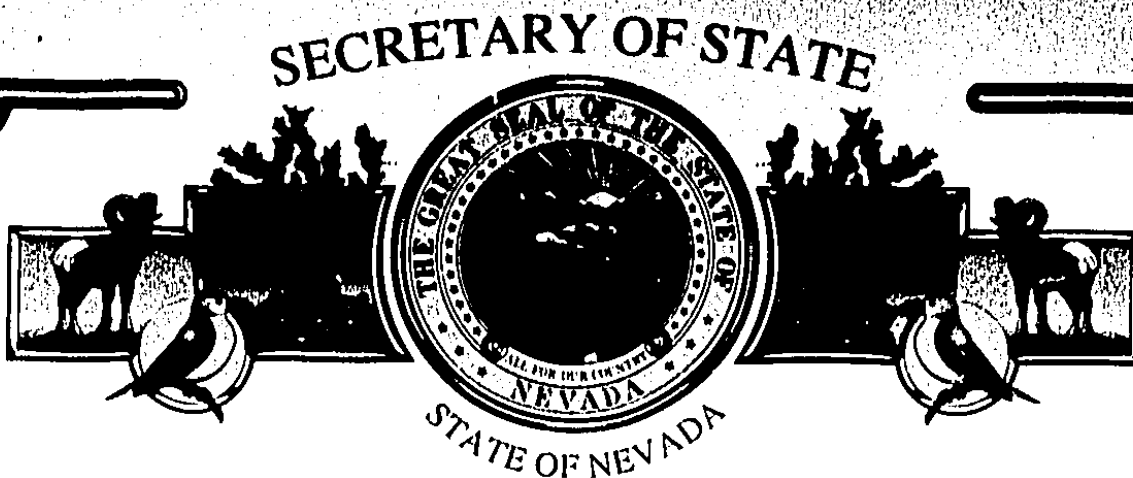
13. Robin Butler

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

14. Robin Butler

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

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**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, **MRM FUNDING, INC.** 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.

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 3, 1996.



Dean Heller

Secretary of State

By

Susan M. McCallister

Certification Clerk

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TALLAHASSEE FLORIDA