F960000002768

SUBJECT:

American Londing Group, Incorporated
(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:

Christine C. Nuyen

Christine C. Nuyen

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

Gaithersburg, MD 20879 (City/State/Zip)

Christine C. Nuyen
(Name of Person)

Qualification/Tax Lien Section

TO:

at (301) 417-6505

(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



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

July 17, 1996

CHRISTINE C. NUYEN AMERICAN LENDING GROUP, INCORPORATED 19642 CLUB HOUSE ROAD SUITE 620 GAITHERSBURG, MD 20879

SUBJECT: AMERICAN LENDING GROUP, INCORPORATED Ref. Number: W96000014957

We have received your document for AMERICAN LENDING GROUP, INCORPORATED and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your corporate name is not available for use in Florida. It appears you may be aware of this and may be attempting to adopt a name. However, a name adoption must be done in the form of a resolution; a blank form is attached for your convenience.

The name listed in line 1 of your application must be identical to the name as it appears on your certificate. A highlighted photocopy of your certificate is attached for reference.

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.

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Lee Rivers Document Examiner

Letter Number: 096A00034697

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersignedChris	stine C. Nuyen (Nume)		do hereby certify
that this Resolution of the Be	oard of Directors of		
American Lend	ing Group Inco	rporated	
a corporation duly organized	i and existing under the la	ws of the State of	Maryland ,
was duly adopted on		July 22	, 1996
Be it resolved, thatAmo			
American Lendin	g Group, Incorpo	orated of Mar	yland for use in Florida.
Dated:July 22, 19	96		
	All.	UL	
Si	ignature of either Chairman, V	ic Chairman or any off	cer
	Christine C. I		

INHS19(4/96)

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:

l.	Amorican Lending Group. Incorporated (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.)	<u> </u>	
2.	(State or country under the law of which it is incorporated) 3. 52-1869857 (FEI number, if applicable)		
	(Date of Incorporation) 5, Porpotual (Duration: Year corp. will cease to exist "perpetual") 10/1/96 (Date first transacted business in Florida. (SHE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.) 19642 Club House Road, Ste 620		SECRETA NIVISION OF
6.	10/1/96 (Date first transacted business in Florida. (SHE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)	<u> </u>	당각
	(Date first transacted business in Florida, (SHE SECTIONS 607,1501, 607,1502, AND 817,155, F.S.)	ž	召류
7.	19642 Club House Road, Ste 620	₩_	. 질년
		23	뎙
	Gaithersburg, MD 20879 (Current mailing address)		. "
9.	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box Name:	<u>OT</u>	
	Office Address: 2211 Hamphire Ct		
	Safety Harbor, Florida, 34695 (Zip Code)	_	
10). Registered agent's acceptance: (Zip Code)		:
re al	aving been named as registered agent and to accept service of process for the above proporation at the place designated in this application, I hereby accept the appoint of a sistered agent and agree to act in this capacity. I further agree to comply with the provided statutes relative to the proper and complete performance of my duties, and I am family accept the obligations of my position as registered agent. (Registered agent's signature)	tme: visio	nt as ons of
1	 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 	•	

incorporated.

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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: Carlon Saonz Address: 19743 Solby Avonue Poolegville, MD 20837 Vice Chairman: christing C. Nuvon Address: 13734 Valley Oak Circle Rockville. MD 20850 Director: Solomon Kaspi Address: 19904 Gateshead Circle Germantown, MD 20876 Director: Address: B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: _____Solomon_Kaspi____ Address: 19904 Gateshead Circle Germantown, MD 20876 Vice President: Carlos Saenz Address: 19743 Selby Avenue Poolesville, MD 20837 Sccretary: Christine C. Nuyen Address: 13734 Valley Oak Circle Rockville, MD 20850 Treasurer: Christine C. Nuven Address: 13734 Valley Oak Circle Rockville, MD 20850 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 13. __ (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

Christine C. Nuyen
(Typed or printed name and capacity of person signing application)

STATE OF MARYLAND

452505

STATE DEPARTMENT OF ASSESSMENTS AND TAXATION

301 West Preston Street Bultimore, Maryland 21201

I, JACQUELINE C JAMES OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT SAID DEPARTMENT, BY THE LAWS OF SAID STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATE CHARTERS, OR OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE; AND I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT AMERICAN LENDING GROUP, INCORPORATED IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND SAID CORPORATION HAS FILED ALLOW ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES OF THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN THE STATE OF MARYLAND.



IN WITNESS WHEREOF, I HAVE HEREUNTO SET MY HAND AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE THIS 13TH DAY OF JUNE, 1996.

JACQUELINE C JAMES OFFICE SUPERVISOR I

AT5-031