To: Qualification/Tax Lien Section		
Division of Corporations	Court and Table	DOA THEIN
SUBJECT: FINANCIAL		DISA LINITION
(Name of corpora	tion - must include suffix)	LENIDING
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for "Certificate of Existence", and check are submitted to	or Authorization to Transact Busines to register the above referenced foreign	ss in Florida", gn corporation to
transact business in Florida.		24912359
Please return all correspondence concerning this mat	tter to the following: -04/	16/9801111001 **78.75 *****78.75
Name	e of Person)	w98-8616
(Name		- 1
_ +INANCIAL	SOLUTIONS, INC	<u></u>
5714 St.	(Company)	
(A	Address)	
Ft. Wayne	JN 412835 /State/Zip)	1 86 1 86
(City)	/State/Zip)	APR
Should you need to call someone concerning this m	atter, please call:	FILED TARY OF TOTAL 29 AM
Mukhi (ARK) at (2)	19,4810-2301	KT 330 IN
(Name of Person)	Area Code & Daytime Telephone Nu	mber) ∞
,		inth
COURIER ADDRESS:	MAILING ADDRESS:	4/29
Qualification/Tax Lien Section Division of Corporations	Qualification/Tax Lien Section Division of Corporations	1
409 E. Gaines St. Tallahassee, FL 32399	P.O. Box 6327 Tallahassee, FL 32314	· :

Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

April 17, 1998

NYKKI CLARK FINANCIAL SOLUTIONS INC 5714 ST. JOE RD. FT WAYNE, IN 46835

SUBJECT: FINANCIAL SOLUTIONS, INC.

Ref. Number: W98000008616

We have received your document for FINANCIAL SOLUTIONS, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

Your original name is not avaliable, so therfore you would need to adopt a DBA name. The proper procedure is to complete a resolution which I have enclosed for your convienence. Also I will do a refund for the name registration.

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 (850) 487-6097.

Michael Mays Document Specialist

Letter Number: 298A00020684

98 APR 29 AM 9: 58



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

RESOLUTION OF BOARD OF DIRECTORS

I, the undersigned DAVIO C. BOOK, do he that this Resolution of the Board of Directors of Financial Sau	nous, I	ÿ <u>A</u> nc ∙
a corporation duly organized and existing under the laws of the State of, 1995	<u>IĎIAMA</u> : :	r Civil
Resolved, that FINANCIAL SOLUTIONS INC. and existing in the State of INDIANA, hereby adopts the name INFINITY LENDING, Inc.	APR 22 AM 9: 58	CRETARY OF STATE
Dated: April 22, 1998	- , , , ,	
Signature of at reast one district.		

INHS19(3/95)

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. FINANCIAL SOLUTIONS, TAC. DEA TIME LENDING, TAX (EINFLORIOR) (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. INDIANA ALLEN (O. 3. 35-19675-62. (State or country under the law of which it is incorporated) (FEI number, if applicable)
4. Nov. 8 1995 5. PERPETUAL (Duration: Year corp. will cease to exist or "perpetual")
6. DENDING ADDREVOL (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7: CO FINANCIAI SOLUTIONS JAC.
(Current mailing address)
8. Crupose(s) of corporation authorized in home state or country to be carried out in state of Florida) [Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) [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 or Mail Drop Box NOT acceptable) 88 Name: DAVIO C. POOK Office Address: 15 CLENDALE St., A-14 CLEARUATER BEACH, Florida, 34430 (Zip code) 89 (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. (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. Name	s and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)		
A. DIRE	CTORS (Street address only - P.O. Box NOT acceptable)		
Chairman:	LARRY MAUGHERMAN	-	
Address:	5714 St. JOE Rd.		
_	FF. WOUNE, IN 46835		
Vice Chair	man: DAVIO C. BOEK		<u></u>
Address:	5714 St. JOE Rd.		
Audicss.	FAIL MINE JA 41885	, <u>.</u>	
	1,10000		-
Director:			
Address:			
Director:			
Address:			
-	TO DO Dow NOT occoptable)	98 4	<u>S</u>
B. OFF	ICERS (Street address only - P.O. Box NOT acceptable)	PR 2	≅ 27 27 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
President:	HRRY N-11 WUCHTER MAN		YE -
Address:	5114 St. JUE Rai	_ 	ST ST
	B. Wayne, IN Horso	- 5 8	AIE ONS
Vice Pres	sident: DAVIO C. EST		
Address:	5714, St. JOE KOL-		<u>.</u>
	FT. Wayne, IN 46835		· ·
Secretary			
•			
110000			·
T			
Address:		1	
			 -
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)		
1.4	LARRY & MONGHERMAN - PRESIDENT		
14	LARRY R. MAUGHERMAN - PRESIDENT (Typed or printed name and capacity of person signing application)		

STATE OF INDIANA

OFFICE OF THE SECRETARY OF STATE

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, SUE ANNE GILROY, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

FINANCIAL SOLUTIONS, INC.

filed Articles of Incorporation on November 09, 1995, and is a corporation duly organized and existing under and by virtue of the laws of the State of Indiana.

I further certify this corporation has filed its most recent annual report required by Indiana law with the Secretary of State, or is not yet required to file such annual reports, and that Articles of Dissolution have not been filed.

98 APR 29 AM 9: 58



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this Fourteenth day of April, 1998.

Sue anne Gilroy, Secretary of State

Deputy