

F90000002785

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: AMSTERDAM MORTGAGE CORP.

(Name of corporation - must include suffix)

Dear Sir or Madam:

600002525136--8
-05/15/98-01041--001
*****78.75 *****78.75

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:

BRIAN BACCHUS

(Name of Person)

AMSTERDAM MORTGAGE CORP.

(Firm/Company)

ONE CROSS ISLAND PLAZA, SUITE 212

(Address)

ROSEDALE, NEW YORK 11422

(City/State/Zip)

FILED
98 MAY 15 PM 1:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

BRIAN BACCHUS

at (718) 481-9830

(Name of Person)

(Area Code & Daytime Telephone Number)

COURIER ADDRESS:

Qualification/Tax Lien Section
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

5/15/98



Amsterdam Mortgage

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FHA APPROVED FINANCIAL INSTITUTION

May 7th, 1998

Florida Department Of State
Division Of Corporation
P.O. Box 6327
Tallahassee, FL 32314

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dear Sir or Madam:

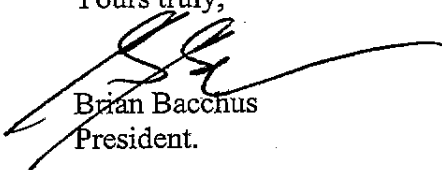
Enclosed are:

- ▶ Original Certificate Of Existence.
- ▶ Completed application and Transmittal Letter
- ▶ Our check number 1770 in the amount of \$78.75, being payment of registration fee and a Certificate of Status .

Please contact us at your earliest convenience if you need any additional information.

Thank you.

Yours truly,


Brian Bacchus
President.

**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. AMSTERDAM MORTGAGE CORPPRATION
(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. STATE OF NEW YORK
(State or country under the law of which it is incorporated)
3. _____
(FEI number, if applicable)
4. 11/01/95
(Date of incorporation)
5. PERPETUAL
(Duration: Year corp. will cease to exist or "perpetual")
6. _____
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. ONE CROSS ISLAND PLAZA, SUITE 212
ROSEDALE, NEW YORK 11422
(Current mailing address)
8. MORTGAGE LENDING INSURANCE BROOKERAGE INVESTMENT SERVICE
(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)
- Name: JOHN LAROSE
- Office Address: 4800 S.W. 64th AVENUE SUITE 105D
DAVIE FLORIDA, Florida, 33314
(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.

John La Rose

(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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TALLAHASSEE, FLORIDA

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: BRIAN BACCHUS

Address: 168 CONNECTICUT AVENUE
FREEPORT NEW YORK 11520

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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TALLAHASSEE, FLORIDA

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

President: BRIAN BACCHUS

Address: 168 CONNECTICUT AVENUE
FREEPORT NEW YORK 11520

Vice President: JOHN LAROSE

Address: 8795 S.W. 56th PLACE
COOPER CITY, FLORIDA 33328

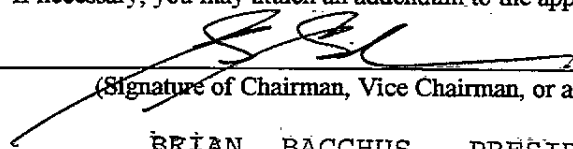
Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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)

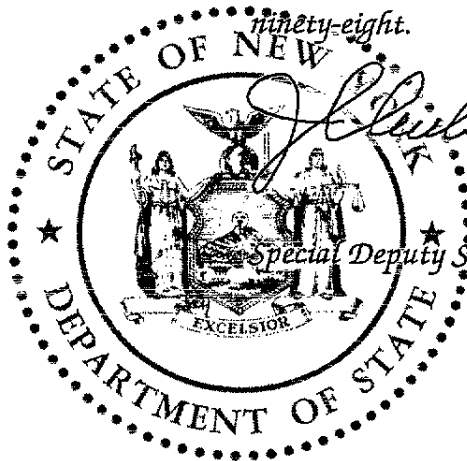
14. BRIAN BACCHUS, PRESIDENT
(Typed or printed name and capacity of person signing application)

State of New York
Department of State | ss:

I hereby certify, that the certificate of incorporation of AMSTERDAM MORTGAGE CORP. was filed on 11/01/1995, with perpetual duration, and that a diligent examination has been made of the index of corporation papers filed in this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

The Corporation Biennial Statement is past due.

Witness my hand and the official seal
of the Department of State at the City
of Albany, this 22nd day of April
one thousand nine hundred and
ninety-eight.



Special Deputy Secretary of State

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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