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C T Corporation System				
Requestor's Name 660 East Jefferson Stre	eet	3		-6
Address Tallahassee, FL 32301			08/12/9801084008 *****70.00 *****70.	00
City State Zip	Phone			
CORPORATION	(S) NAME			
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Continental	hlingate (- apital - Jo		
→Profit () NonProfit	() Amend	ment	() Mark ORATIO	
() Limited Liability Company	() Dissolu	tion/Withdrawal	() Mark 00 12 19	
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Document Examiner Updater			FILE STAMPER, P. D. THANKS TO STAT JOEY RAT 36	•
Verifier				
Acknowledgment				

CR2E031 (1-89)

W.P. Verifier

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION 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.	Continental Wingate Capital - Southeast, Inc.	· · · · · · · · · · · · · · · · · · ·	
	(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION", abbreviations of like import in language as will clearly indicate that it is a corporation instead of a nat or partnership if not so contained in the name at present.)	or words or ural person	
2.	Georgia3. 58-2312035(State or country under the law of which it is incorporated)(FEI number, if a	applicable)	. <u> </u>
4.	4/17/97 5. Perpetual (Date of incorporation) (Duration: Year corp. will cease to exist or "p	∰etual") ⊆	
6.	Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.)		
7.	75 Central Street		
	Boston, MA 02109	თ	
	(Current mailing address)		
8.	all lawful purposes mortgage broker		

all lawful purposes -- mortgage broker (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:

Name: C T CORPORATION SYSTEM

Office Address: ______ c/o C T Corporation System, 1200 South Pine Island Road

Plantation _____, Florida, _____

(Zip Code)

10. Registered agent 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 obligation of my position as registered agent.

CORPORATION SYSTEM Registered agent's signa (Une) (Unficer EFECIAL ASST. SECRETARY

(Type Name and Title of Officer)

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:

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

Chairman:	Todd Schuster			
Address:	75 Central Street	98 TAL		
	Boston, MA 02109	JUN		
Directo	r:Michael D. Berman	12 ASSE		
	75 Central Street			
	Boston, MA 02109	M 1:36	ED D	
Director:	James Curtis			
Address: _	75 Central Street	-		
_	Boston, MA 02109	-		 2
Director: _	Jeffrey M. Goodman			
Address:	75 Central Street	_		-
	Boston, MA 02109	-		
OFFICERS (Stre	et address only - P.O. Box NOT acceptable)			
President	Michael D. Berman	_		
Address:	75 Central Street	_		
	Boston, MA 02109	-		-
Vice Pres	sident:James Curtis			
Address:	75 Central Street			
	Boston, MA 02109	<u> </u>		
	Y:Jeffrey M. Goodman			
	75 Central Street			
	Boston, MA 02109			

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Treasurer:	Brian E. Callahan	-		
Address: _	75 Central Street			-
	Boston, MA 02109		-	

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

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. î 4 13. <u>Here Ludd</u> (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

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Brian E. Callahan Treasurer	
14. <u>(Typed or printed name and capacity of person signing application)</u>	FILED JUN 12 PH 1: 36 CRETANY UF STATE LAHASSEE FLORIDA

Secretary of State Corporations Division Suite 315, West Tower 2 Martin Luther King Jr. Dr. Atlanta, Georgia 30334-1530

DOCKET NUMBER : 981610148 CONTROL NUMBER : 9715221 DATE INC/AUTH/FILED: 04/17/1997 JURISDICTION : GEORGIA PRINT DATE : 06/10/1998 FORM NUMBER : 211

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Georgia,

CT CORPORATION SYSTEM PATTIE HARDY 1201 PEACHTREE STREET, NE ATLANTA, GA 30361

CERTIFICATE OF EXISTENCE

I, Lewis A. Massey, the Secretary of State of the seal of my office that

CONTINENTAL WINGATE CAPITAL - SOUTHEAST, INC. A DOMESTIC PROFIT CORPORATION

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the abovenamed entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



Jenis 4. Massey

Lewis A. Massey Secretary of State