

# F 980000003518

CAPITOL SERVICES d/b/a  
 PARALEGAL & ATTORNEY SERVICE BUREAU, INC.

(Requestor's Name)  
 1406 Hays Street, Suite 2  
 (Address)  
 Tallahassee, FL 32301 (904) 656-3992  
 (City, State, Zip) (Phone #)

OFFICE USE ONLY

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 -06/22/98--01040--006  
 \*\*\*122.50 \*\*\*122.50

**CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):**

1. WMF of America, Inc. (Corporation Name) \_\_\_\_\_ (Document #) \_\_\_\_\_
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #) \_\_\_\_\_
3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #) \_\_\_\_\_
4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #) \_\_\_\_\_

Walk in   
  Pick up time 6/22   
  Certified Copy  
 Mail out   
  Will wait   
  Photocopy   
  Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input checked="" type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark

RECEIVED  
 98 JUN 22 AM 10:58  
 DIVISION OF CORPORATION  
 SECRETARY OF STATE  
 TALLAHASSEE FLORIDA  
 98 JUN 22 PM 12:01  
 FILED  
 W/6/22

Examiner's Initials



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: N/A

Address: \_\_\_\_\_

Vice Chairman: N/A

Address: \_\_\_\_\_

Director: Rolf Allmendinger

Address: c/o WMF of America, Inc.

85 Price Parkway, Farmingdale, NY 11735

Director: Peter B. Martini

Address: c/o WMF of America, Inc.

85 Price Parkway, Farmingdale, NY 11735

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98 JUN 22 PM 12:01  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

President: Ray Teilborg

Address: c/o WMF of America, Inc.

85 Price Parkway, Farmingdale, NY 11735

Vice President: N/A

Address: \_\_\_\_\_

Secretary: Hanno D. Mott

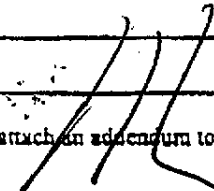
Address: c/o Koenig, Ratner and Mott P.C.

152 West 57th Street, New York, NY 10019

Treasurer: N/A

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. Hanno D. Mott, Secretary  
(Typed or printed name and capacity of person signing application)

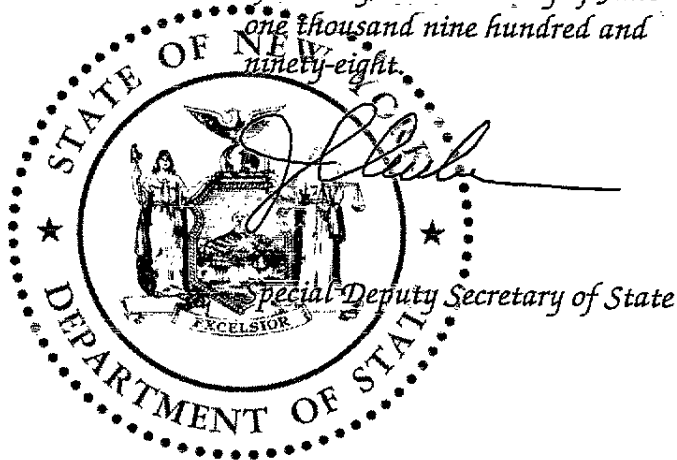
State of New York )  
Department of State ) ss:

I hereby certify, that the certificate of incorporation of WMF OF AMERICA, INC. was filed on 02/18/1960, under the name of TARIS IMPORTS, INC., fixing the duration as perpetual, 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.

A Certificate of Amendment TARIS IMPORTS, INC., changing name to WMF OF AMERICA, INC., was filed 12/18/1968.

\*\*\*

Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 16th day of June  
one thousand nine hundred and  
ninety-eight.



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SECRETARY OF STATE  
TALLAHASSEE FLORIDA