F98000005556

S 9:27 AM

PUBLIC ACCESS SYSTEM
ELECTRONIC FILING COVER SHEET

(((H98000018418 7)))

TO: DIVISION OF CORPORATIONS FAX #: (850)922-4003

FROM: BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC. ACCT#: 075350000353
CONTACT: JOSE MOJICA
PHONE: (212)431-5000 FAX #: (212)431-1441

NAME: IPI FINANCIAL SERVICES, INC.
AUDIT NUMBER......H98000018418
DOC TYPE..........FOREIGN PROFIT QUALIFICATION
CERT. OF STATUS..0 PAGES....... 3
CERT. COPIES......0 DEL.METHOD.. FAX
EST.CHARGE.. $70.00

NOTE: PLEASE PRINT THIS PAGE AND USE IT AS A COVER SHEET. TYPE THE FAX AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

** ENTER 'M' FOR MENU. **
** INVALID SELECTION...PLEASE RE-ENTER **
ENTER SELECTION AND <CR>:

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 OCT -5 PM 3:17

1015

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

H98000018418

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. IPI Financial Services, Inc.
(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. New York
(State or country under the law of which it is incorporated)

3. 13-360-3628
(FEI number, if applicable)

4. February 13, 1991
(Date of Incorporation)

5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")

6. Upon Filing This Certificate
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)

7. 120 West 45th Street - 2nd Flr.
New York, NY 10036
(Current mailing address)

8. to engage in any and all legal activities associated with originating mortgages.
(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: (P.O. Box or Mail Drop Box NOT acceptable)**

Name: Michele McGarity

Office Address: 1255 Pennsylvania Ave.-Ste 107

Miami Beach , Florida, 33139 (Zip Code)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 OCT -5 PM 3:

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.

Michelle McGarity
(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. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable)

H98000018418

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

Chairman: ______

Address: ______

Vice Chairman: ______

Address: ______

Director: Doug W. Naidus

Address: 120 West 45th Street-2nd Flr.
New York, NY 10036

Director: Mark C. Pappas

Address: 120 West 45th St.-2nd Flr.
New York, NY 10036

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

President: Doug W. Naidus

Address: 120 West 45th St.-2nd Flr.
New York, NY 10036

Vice President: Mark C. Pappas

Address: 120 West 45th St.-2nd Flr.
New York, NY 10036

Secretary: Gary A. Bierfriend

Address: 120 West 45th St.-2nd Flr.
New York, NY 10036

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. Gary A. Bierfriend, Secretary
(Typed or printed name and capacity of person signing application)

BlumbergExcelsior
62 White St
NY, NY 10013

212-431-5000
H98000018418

State of New York } SS:
Department of State

H98000018418

I hereby certify, that the certificate of incorporation of IPI FINANCIAL SERVICES, INC. was filed on 02/13/1991, under the name of I.P.I. FINANCIAL SERVICES, INC., 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. I further certify the following:

A Certificate of Amendment I.P.I. FINANCIAL SERVICES, INC., changing name to IPI FINANCIAL SERVICES, INC., was filed 09/19/1997.

A Biennial Statement was filed 11/03/1997.

Certificate of change was filed on 05/19/1998.

I further certify, that no other certificates have been filed by such corporation.

STATE OF NEW YORK DEPARTMENT OF STATE

Witness my hand and the official seal of the Department of State at the City of Albany this 17th day of September one thousand nine hundred and ninety-eight.

Special Deputy Secretary of State

199809180039 54

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 OCT -5 PM 3:17

BlumbergExcelsior
62 White St
NY, NY 10013
212-431-5000

H98000018418