



THE UNITED STATES  
CORPORATION  
COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 999507 7130598

AUTHORIZATION :

*Patricia Pizeto*

COST LIMIT : \$ 70.00

ORDER DATE : October 16, 1998

ORDER TIME : 9:17 AM

ORDER NO. : 999507-005

CUSTOMER NO: 7130598

500002669725--5

CUSTOMER: Ms. Sue Heath  
Imperial Capital Resource  
200 Lanidex Plaza, 2nd Floor

Parsippany, NJ 07054

FOREIGN FILINGS

NAME: INSIGNIA TITLE SERVICES, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Christopher Smith

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 OCT 22 AM 10:43

*mtm*  
10/22

RECEIVED  
98 OCT 22 AM 9:49  
DIVISION OF CORPORATION

**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. Insignia Title 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 Jersey 3. applied for  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 10/6/98 5. perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. no business transacted yet  
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.))
7. 200 Lanidex Plaza-2nd Floor  
Parsippany, NJ 07054  
(Current mailing address)
8. Any activity including but not limited to, to sell title insurance and to provide  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) real estate settlement services
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)  
Name: Corporation Service Company  
Office Address: 1201 Hays Street  
Tallahassee, Florida, 32301  
(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.*

Corporation Service Company

By: Anthony J. Johnson  
(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)

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

Chairman: \_\_\_\_\_

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

Vice Chairman: \_\_\_\_\_

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

Director: Julie Adams

Address: 10 Joanna Way

Kinnelon, NJ 07405

Director: \_\_\_\_\_

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

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

President: Julie Adams

Address: 10 Joanna Way

Kinnelon, NJ 07405

Vice President: Laura Dwojewski

Address: 200 Lanidex Plaza-2nd Floor

Parsippany, NJ 07054

Secretary: Julie Adams

Address: 10 Joanna Way

Kinnelon, NJ 07405

Treasurer: Julie Adams

Address: 10 Joanna Way

Parsippany, NJ 07405

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

13. Laura Dwojewski

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application.)

14. Laura Dwojewski, Vice President

(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING

INSIGNIA TITLE SERVICES, INC.

*I, the Treasurer of the State of New Jersey,  
do hereby certify that the above-named  
New Jersey Domestic Profit Corporation was  
registered by this office on October 6, 1998.*

*As of the date of this certificate, said business  
continues as an active business in good standing  
in the State of New Jersey, and its Annual Reports  
are current.*

*I further certify that the registered agent and  
registered office are:*

*Corporation Service Company  
830 Bear Tavern Rd  
Trenton, NJ 08628*

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DIVISION OF CORPORATIONS

STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING

INSIGNIA TITLE SERVICES, INC.

IN TESTIMONY WHEREOF, I have  
hereunto set my hand and  
affixed my Official Seal  
at Trenton, this  
19th day of October, 1998



*James A. DiEleuterio, Jr.*

James A DiEleuterio, Jr.  
Treasurer

98 OCT 21 PM 10:43

DIVISION OF REVENUE