

F990000000243



THE UNITED STATES
CORPORATION
COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 086167 7158973

AUTHORIZATION :

Patricia Pizant

COST LIMIT : \$ 70.00

ORDER DATE : January 4, 1999

ORDER TIME : 12:11 PM

700002741117--5

ORDER NO. : 086167-010

CUSTOMER NO: 7158973

CUSTOMER: Mr. Hans Dietterich
Mr. Hans Dietterich
104 Summer Street
Hingham, MA 02043

RECEIVED

99 JAN 13 PM 4:42

DEPARTMENT OF STATE
DIVISION OF CORPORATION
TALLAHASSEE, FLORIDA

FOREIGN FILINGS

NAME: HOMESOS PROGRAM, 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: Tamara Odom

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99 JAN 14 AM 10:36

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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. HOMESOS PROGRAM, 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. DELAWARE

(State or country under the law of which it is incorporated)

3. 04-343-3908

(FEI number, if applicable)

4. 7/9/98

(Date of Incorporation)

5. PERPETUAL

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

6. January 13, 1999

(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))

7. 1145 HANCOCK STREET, SUITE E

QUINCY, MA

02169

(Current mailing address)

8. Contracted service, admin, counseling + marketing for Nonprofit Housing Corps.

(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: 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: [Signature]

(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: SEE ATTACHED DIRECTORS RIDER

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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

President: HANS C. DIETTERICH

Address: 104 SUMMER STREET
HINGHAM, MA 02043

Vice President: HOWARD ALPER

Address: 1145 HANCOCK ST., SUITE E
QUINCY, MA 02169

Secretary: _____

Address: _____


Treasurer: _____

Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. HANS C. DIETTERICH PRESIDENT
(Typed or printed name and capacity of person signing application)

**HomeSOS Program, Inc.
Officers/Directors Rider**

Officers:

| | | |
|--------------------|---------------------------|---|
| Hans C. Dietterich | President | 104 Summer St. Hingham, MA 02043 |
| Howard P. Alper | Vice President/Secretary | 1145 Hancock St., Suite E Quincy, MA 02169 |
| Elaine Hawks | Vice President/Compliance | PO Box 3227 Cumming, GA 30040 |

Directors:

| | | |
|----------------------|----------|---|
| Hans C. Dietterich | Chairman | 104 Summer St. Hingham, MA 02043 |
| Howard P. Alper | | 1145 Hancock St., Suite E Quincy, MA 02169 |
| Elaine Hawks | | PO Box 3227 Cumming, GA 30040 |
| Christine Dietterich | | 104 Summer St. Hingham, MA 02043 |
| Joseph Herren | | 70 Whitlock Place Marietta, GA 30064 |

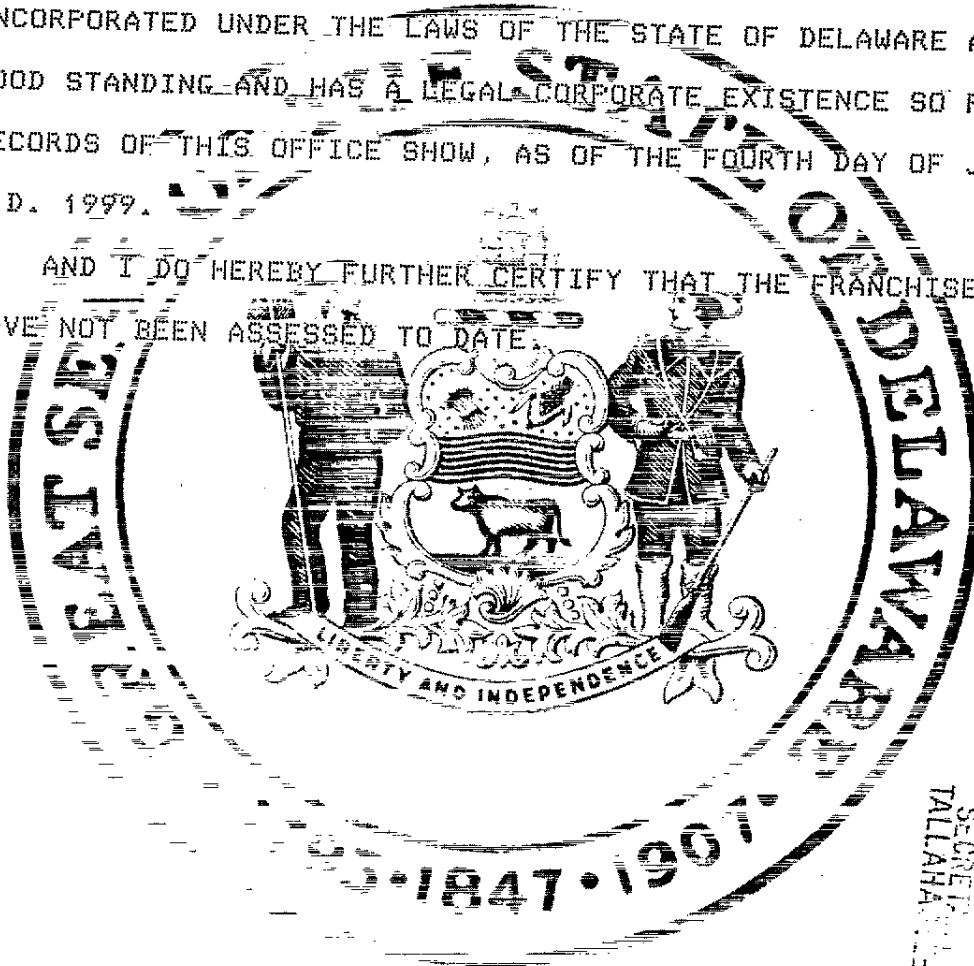
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SECRET
TALLAHASSEE, FLORIDA

State of Delaware
Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HOMESOS PROGRAM, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTH DAY OF JANUARY, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.



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99 JAN 14 AM 10:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Edward J. Freel

Edward J. Freel, Secretary of State

AUTHENTICATION:

2918463 8300

DATE: 9500937

991001085

01-04-99