TRANSMITTAL LETTER

To:	Qualification/Tax Lien Section Division of Corporations	
SUBJE	ECT: M&MRESONCES CONSUMER SISCONT (Name of corporation - must include suffix)	The.
	(Name of corporation - must include suffix)	-
Dear S	Sir or Madam:	-
"Certif	sclosed "Application by Foreign Corporation for Authorization to Transact Bicate of Existence", and check are submitted to register the above referenced sact business in Florida.	
Please	return all correspondence concerning this matter to the following: MICHARE S. MACONI PRESIDENT (Name of Person)	0028295577 -04/05/9901127001 _*****70.00 *****70.00
	(Name of Person) MENORIES CONSUMER DISCOUNT (Firm/Company)	<u></u>
	1577 KISCERORD W. SUITE 118 (Address)	
	BOUTESTY, NEW YORK 14615 (City/State/Zip)	
	You need to call someone concerning this matter, please call: HAKL S. MACON at (D/L) \$65 - 6950 (Name of Person) (Area Code & Daytime Telephone)	99 APR - 6 SECRETAR TALLAHASS
STRE	ET ADDRESS: MAILING ADDRESS:	-
Divisio 409 E.	ication/Tax Lien Section On of Corporations Gaines St. Gassee, FL 32399 Qualification/Tax Lien Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	etion = 4/4/1/99 = 4/4/1/99
Enclos	ed is a check for the following amount:	÷
X \$70	0.00 Filing Fee	\$87.50 Filing Fee, Certificate of Status & Certified Copy

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 FI	LŌRIDA.	
1. MEM RESORVES CONSUMER SISCOUNT, INT.		
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATE		
words or abbreviations of like import in language as will clearly indicate that it is a corporation inste- natural person or partnership if not so contained in the name at present.)	ad of a	
mandate possent of participants in not so contained in the name at present.)		
1200 Val V		
2. New York 3. 16-1478587 (State or country under the law of which it is incorporated), (FEI number, if appl	t	
(FEI number, it appl	icable)	
2. New York (State or country under the law of which it is incorporated) 4. March IL, 1995 (Date of incorporation) (Duration: Year corp. will cease to existence of the control of the corporation)	-	
6. TO Commerce UPON RECEIPT OF AUTHORISM (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155.	- - - -	
4	, F <u>.S</u> .)	
7. 1577 RIDGE ROAD W. SUINE 118		
Promeron New York 14115	<u>=</u>	- :.
ROCHESTER, NEW YORK 14615 (Current mailing address)		<u>**</u>
(0.000000000000000000000000000000000000	=	
e - Sald (Friends Compared		
8. SALES FINANCE COMPANY (Purpose(s) of corporation authorized in home state or country to be carried out in state of Flor	rida)≱ç 99	- -
		· · · · · · · · · · · · · · · · · · ·
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box <u>NO</u>	Tacceptable)	
Name: LARRY SAVIS	- SS - 6	
· · · · · · · · · · · · · · · · · · ·	To R	
Office Address: 938 CLINT MOURE ROM	ANII: 2:	
BOCARATON, Florida, 33487	章 经营 %	i i i i i i i i i i i i i i i i i i i
(Zip code)	$=$ $\frac{\lambda}{\Omega}$ Ω	
(Zip code)	-	
10. Registered agent's acceptance:		
Having been named as registered agent and to accept service of process for the above stated corporat		
this application, I hereby accept the appointment as registered agent and agree to act in this capacity.		
with the provisions of all statutes relative to the proper and complete performance of my duties, and l	am familiar with a	ınd accept
the obligations of my position as registered agent.	=	
Registered agent's signature)		. .
(Registered agent's signature)		
/		
11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of t Department of State, by the Secretary of State or other official having custody of corporate records in the	his application to the	the less of
	~ lairearchon midel	uic law Ol

which it is incorporated.

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)	
Chairman: MICHARL S. MALONI	=
Address: 330 KILLEN DRIVE	
ROCHESTER NEW YORK 14615	
/ice Chairman:	
Address:	
litector	
director:	1±1
ddress:	
irector:	j j
ddress:	· <u>3</u>
OPERCODE (C.	
OFFICERS (Street address only - P.O. Box NOT acceptable)	SEC SEC
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idress:	SSE -6
ce President:	.0RII - 0RII
dress:	A A
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dress:	-
	1200
TE: If necessary, you may attach an addendum to the application listing additional officers	and/or directors.
Makel (Sold)	· · · · · · · · · · · · · · · · · · ·
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of	
- NICHBLAS R. BOTTINI SOVP-H	TNANCE

M & M RESOURCES CONSUMER DISCOUNT' INC.

NAME

MICHAEL S. MALONI 330 EILEEN DRIVE ROCHESTER, NEW YORK 14616

PRESIDENT CHIEF EXECUTIVE OFFICER

TITLE

THOMAS CRANSTON 17 TWINBROOK COURT CLIFTON PARK, NEW YORK 12065

SENIOR VICE PRESIDENT-PRODUCTION

NICHOLAS R. BOTTINI 168 WOODSTOCK ROAD ROCHESTER, NEW YORK 14609

SENIOR VICE PRESIDENT-FINANCE AND COMPLIANCE

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SECRE PASSEE, FLORIDA

State of New York Department of State

I hereby certify, that the certificate of incorporation of M & M RESOURCES CONSUMER DISCOUNT, INC. was filed on 03/14/1995, 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 Biennial Statement was filed 03/27/1997.
- A Biennial Statement was filed 03/22/1999.
- I further certify, that no other certificates have been filed $b\overline{y}$ such corporation.

Witness my hand and the official seal

Note the Department of State at the City
of Albany, this 29th day of March
one thousand nine hundred and
ininety-nine.

Special Deputy Secretary of State

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