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<u></u> -	1331 East Lafayette Street, Suite C Tallahassee, Florida 32301 Voice: (904) 942-5464 Fax: (904) 942-51	111	
		Office	Use Only
CORPORATION	N NAME(S) & DOCUMENT N	UMBER(S), (if known	n):
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NEWFILINGS	AMENDMENTS		1011/
Profit	Amendment		-w99-10/66
NonProfit	Resignation of R.A., Officer/Di	rector	·
Limited Liability	Change of Registered Agent	i	
Domestication	Dissolution/Withdrawal		- -
Other	Merger		
OTHER FILINGS	REGISTRATION/	-04	028578225 4/30/9901006022 *****78.75 *****78.75
Annual Report	QUALIFICATION		
Fictitious Name	Foreign		R 30 M 9
Name Reservation	Limited Partnership		
	Reinstatement		<u> </u>

Trademark Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 6, 1999

FLORIDA COMMLIANCE SPECIALIST INC 1331 EAST LAFAYETTE STREET, SUITE C TALLAHASSEE, FL 32301

SUBJECT: EAGLE MORTGAGE INC.

Ref. Number: W99000010166

We have received your document(s) in this office, however, a copy of the document is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6094.

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Letter Number: 599A00024835

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SECRETARY STATE
ARLANASSEE, FLORIDA

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned NORINE GILMORE (Name)	, do hereby certify
that this Resolution of the Board of Directors of	
EAGLE MORTGAGE INC	· ·
a corporation duly organized and existing under the laws of the State of	LOUISIANA .
was duly adopted onFBRUARY 1	, 19 99
Be it resolved, that <u>EAGLE MORTGAGE</u> TAX. (Corporate Name)	,
organized and existing in the State of Louisi ANA	, hereby adopts the name
EAGLE MORTGAGE FINANCIAL SERVI	TAC. for use in Florida.
**************************************	The C
Dated: 5/18/99	99 t SEI TALI
Signalure of either Chairman, Vice Chairman or any office	99 MAY 19 PH 1: 14 SECRETARS LET LORIE
NORINE GIL MORE Type or print name	PH 1: 14 SLE. FLORID
Type or print name	₽

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:

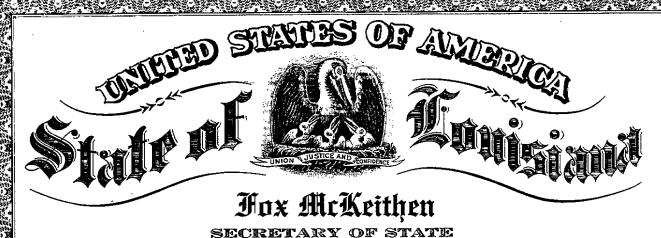
1.	(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)				
2.	Louisiana 3. 721437934 (State or country under the law of which it is incorporated) (FEI number, if applicable)				
4.	(Date of Incorporation) 5. Per Detical (Duration: Year corp. will cease to exist or "perpetual")				
	(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.1554E.S.)	-			
7.	NEW ORLEANS, LA 70117 (Current mailing address)				
	(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: NORINE GILMORE					
Office Address: 7540 S. FEDERALITE / STE/184					
	Hypolaxo , Florida, 33462 (Zip Code)				
10). Registered agent's acceptance:				
co re	aving been named as registered agent and to accept service of process for the above stated or properation at the place designated in this application, I hereby accept the appointment as gistered agent and agree to act in this capacity. I further agree to comply with the provisions of a statutes relative to the proper and complete performance of my duties, and I am familiar with a daccept the obligations of my position as registered agent.	f			

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.

(Régistered agent's signature)

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: NORINE GILMORE Address: __ 6009 TRIPHAMMER Rd LAKE WORTH, FL 33463 Vice Chairman: KAREN TRICHE Address: 1131- Lesseps ST NEW ORLEANS, LA 70117 Director: Address: Director: Address: B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: NORINE GILMORE Address: ______ Vice President: Address: Secretary: KAREN TRICHE Address: Treasurer: NORINE GILMORG Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Vice Chairman, or any officer listed in number 12 of the application) NORING GILMORE PRESIDENT d or printed name and capacity of person signing application)

EN TRICHES SECRETARY



As Secretary of State, of the State of Louisiana, I do hereby Certify that

EAGLE MORTGAGE, INC.

A LOUISIANA corporation domiciled at NEW ORLEANS,

Filed charter and qualified to do business in this State on February 01, 1999,

I further certify that the records of this Office indicate the corporation has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned is in good standing and is authorized to do business in this State.

I further certify that this Certificate is not intended to reflect the financial condition of this corporation since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

Jox W: 1999

TAG 34736835D Secretary of State