F9900000 2750

SUBJECT:	Adams Mortgage Comp	any,	Inc.		
30bibe1					
Dear Sir or Mada					
The enclosed "A "Certificate of E transact business	xistence", and check are submitte	on for Au ed to reg	nthorization to Transact ister the above reference	Business ed foreigr	in Florida", a corporation to
Please return all	Application by Foreign Corporation for Authorization to Transact Business in Florida", Existence", and check are submitted to register the above referenced foreign corporation to ss in Florida. 1 correspondence concerning this matter to the following: C. David Tangora, Esq. (Name of Person) C. DavID TANGORA, P.A. (Firm/Company) 200 S.E. 18th Court (Address) Fort Lauderdale, FL 33316 (City/State/Zip) ed to call someone concerning this matter, please call: Tangora at (954) 779-1005 (Area Code & Daytime Telephone Number) (954) 764-4502-Fax MAILING ADDRESS: Tax Lien Section Division of Corporations St. Qualification/Tax Lien Section Division of Corporations St. P.O. Box 6327 Tallahassee, FL 32314 Check for the following amount: Ing Fee \$78.75 Filing Fee & Certificate of Status & Certificate of Sta				
	C. David Tangora, E.	sq.			99 H
•	(N	ame of P	erson)		
	C. DAVID TANGORA, P	.A.			SSE ILE
	(Fi	rm/Com	pany)		<u> 무용 </u>
	200 S.E. 18th Court	i -			
	Fort Lauderdale, FL	•	•		DA
	(0	City/State	e/Zip)		
Should you need	d to call someone concerning this	s matter,		-05/2	5/9901010006
C. David	Tangoraat (_9	54		<u>.</u>	
	of Person)	-		one Num	ber)
	•	(954)	764-4502-Fax		
STREET ADD	RESS:		MAILING ADDRESS	S:	,
Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399		Division of Corporation P.O. Box 6327	Section ns	5-27-99	
Enclosed is a cl	heck for the following amount:			,	•
□ \$70.00 Filin	ng Fee		_	Cer	

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. Adam	s Mortgage Company, Inc.		
(Name of corpo	ration; must include the word "INCORPORAT	ED", "COMPANY", "CORPORATION	DN" or
	riations of like import in language as will clearl	· -	ead of a
natural person o	or partnership if not so contained in the name at	present.)	
2. Mary	land	3. 52-2154867	
	under the law of which it is incorporated)	3. <u>52 - 215 4867</u> (FEI number, if app	licable)
Janua	×v 20 1000		
***		erpetual ration: Year corp. will cease to exist	or "nemetual")
(Da	e of medipotation) (De	ration. Tear corp. will cease to exist	or perperant y
	siness transacted yet pe		
(Date first	t transacted business in Florida.) (SEE SECTIO	NS 607.1501, 607.1502 and 817.155,	F.S.)
7. 8th fl	∞ r, 2 E. Fayette St., Baltimo	re, Md. 21202	
·			
			
m.	(Current mailing add	•	`
	provide real estate management	• -	
8	administration, and the like fo	r a variety of others	; encicles.
(Purpose)	s) of corporation authorized in home state or co	untry to be carried out in state of Flo	rida)
a Nama and sta	and a delivery of Mariel de manifestance and a second	no no no Mail no no Morr	
y. Mame and Str	eet address of Florida registered agent: (P.O. Box of Mail Drop Box NOT	acceptable)
Name:	C. David Tangora, Esq.	-	LAC MA
•	200 0 = 400		F
Office Address:	200 S.E. 18th Ct.		ASS 25
	B+ Familian 7 3		PH ED
	Ft. Lauderdale,	, Florida,	
		(Zip code)	
i0. Registered a	gent's acceptance:		중대 8
	8		مم _ا س
	d as registered agent and to accept service of p		
	I hereby accept the appointment as registered		
comply with the pr	ovisions of all statutes relative to the proper an	d complete performance of my dutie	s, and I am familiar with
unu accept the obli	gations of my position at registered agent.		
	The total to the same of the s		

11. Attached is a certificate of existence duly authenricated, 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.

(Registered agent's signature)

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

	dress only - P.O. Box NOT acceptable) William L. Siskind			
Chairman:	8th floor, 2 E. Fayette St., Baltimore, Md. 21202			
Address:				
		,,,		
Address:				
Director:	Ida Manly 8th floor, 2 E. Fayette St., Baltimore, Md. 21202			
Address:	8th floor, 2 E. Fayette St., Baltimore, Md. 21202			•
Disease	Tilman E. Rosenblatt			
Director:	8th floor, 2 E. Fayette St., Baltimore, Md. 21202			
President:	2 E. Fayette St., 8th floor, Baltimore, Md. 21202			
Vice President:	Tilman E. Rosenblatt			
Address:	8th floor, 2 E. Fayette St., Baltimore, Md. 21202	- 		
/Treasurer:	Ida Manly			
Address:	8th floor, 2 E. Fayette St., Baltimore, Md. 21202	<u> </u>	<u> </u>	
Treasurer:		AETA ASS	- 25	<u> </u>
		Y 0 - Sil	P	m
NOTE: If necessary, you n	may attach an addendum to the application listing additional officers and/or directors	ĐÃ T		٠
	of Chairman, Vice Chairman, or any officer listed in number 12 of the application) kind, President		<u>, , , , , , , , , , , , , , , , , , , </u>	
14.	(Typed or printed name and capacity of person signing application)	· · · · · · · · · · · · · · · · · · ·		

STATE OF MARYLAND

725963

STATE DEPARTMENT OF ASSESSMENTS AND TAXATION

301 West Preston Street Baltimore, Maryland 21201

I, GLORIA J. WATSON OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT SAID DEPARTMENT, BY THE LAWS OF SAID STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATE CHARTERS, OR OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE; AND I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT ADAMS MORTGAGE COMPANY, INC.

IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND SAID CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILTING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN THE STATE OF MARYLAND.



IN WITNESS WHEREOF, I HAVE HEREUNTO SET MY HAND AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXALION OF MARYLAND AT BALTIMORE THIS 10TH DAY OF MAY, 1999.

OFFICE SUPERVISOR 1

AT5-031