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FLORIDA DEPARTMENT OF STATE Katherine Harris

Katherine Harris Secretary of State

July 28, 1999

CT CORPORATION SYSTEM

ATTN: CONNIE

SUBJECT: COUNTY MORTGAGE CO., INC.

Ref. Number: W99000017444

dibia County Mortgage Services, Inc.

We have received your document for COUNTY MORTGAGE CO., INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

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) 487-6958.

Lee Rivers Document Specialist

Letter Number: 899A00038477

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RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

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this Resolution of the Board of Directors of	County Mor	tgage Co	Inc.		 -
	ponue Name)			-	
	was love of the	State of Nev	Jersey	<u>. </u>	I
orporation duly organized and existing under	i cos la va			. 19 99	٠, ،
us duly adopted on <u>August 3</u>		,			•
e it resolved, thatCounty_Mortgage_Co	Tnc (Corpor	ate Name)		lopis the Harne	.
eganized and existing in the State of <u>Nev</u>	Jersey .				
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County Mortgage Services	, Inc.		•	Z8 A	Ī
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Dated: August 3, 1997.		: /.		RY OF STATE	l i
Jared:				· >	
Signature of eigher Cha	Nice Cha	mian of any off	cer	•	
Signature of either Chi	arman, vier die		•	,	
Peter Tor	etarelli	_	-		•
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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.

 County Mortgage Co., 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 Zersey (State or country under the law of which it is incorporated) 3. 22-2319117 (FEI number, if applicable)
4. September 30, 1980 5. Perpetual (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. The Company is not yet transacting business in Florida (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 33 Clinton Road, Suite 201
West Caldwell, New Jersey 07006
(Current mailing address)
8. Any authorized activity, including mortgage banking
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: C T CORPORATION SYSTEM
Office Address: 1200 South Pine Island Road
Plantation , Florida, 33324
(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. CHARLES W. METER agent's signature)
11. Attached is a certificate of existence dury authennessed, 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. DIREC	CTORS (Street address only - P.O. Box NOT acceptable)
Chairman:	Robert A. Jordan
.ddress: _	33 Clinton Road, West Caldwell, NJ 07006
_	
ice Chain	man: Peter B. Tortorelli
.ddress: _	33 Clinton Road, West Caldwell, NJ 07006
irector: _	Alexander S. Jordan
.ddress: _	33 Clinton Road, West Caldwell, NJ 07006
irector: _	
.ddress: _	
. OFFI	CERS (Street address only - P.O. Box NOT acceptable)
resident:	Robert A. Jordan
.ddress: _	33 Clinton Road, West Caldwell, NJ 07006
- ice Presid	ent Peter B. Tortorelli Sys to
	33 Clinton Road, West Caldwell, NJ 07006
	Alexander S. Jordan
	33 Clinton Road, West Caldwell, NJ 07006
OTE: If	necessary, you may attach an addendum to the application listing additional officers and/or directors.
	(Signature of Chairman, Vice Chairman, or any officer listed in the application)
1	ROBERT A. JORDAN, PRESIDENT
	(Typed or printed name and capacity of person signing application)



