# FLORIDA COMPLETA LOR PRESIDENT O COMPLETA LOR PRESIDENT D COMPLETA LOR

1331 East Lafayette Street, Suite F Tallahassee, Florida 32301 Voice: (850) 942-5464 Fax: (850) 942-5111

Trademark

Other

Office Use Only

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Examiner's Initials

		1	Office Osc Of	<u>.</u>
CORPORATION NA	ME(S) & DOCUMEN	NT NUMBER(S),	(if known):	
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NonProfit	Resignation of R.A., O	fficer/Director		
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CR2E031(1/95)



### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

August 12, 1999

FLORIDA COMPLIANCE SPECIALISTS

TALLAHASSEE, FL

SUBJECT: RESIDENTIAL MORTGAGE CORPORATION

Ref. Number: W99000018736

We have received your document for RESIDENTIAL MORTGAGE CORPORATION and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$78.75 payment.

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) 487-6914.

Buck Kohr Corporate Specialist Letter Number: 999A00040890

INHS19(4/96)

#### RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

	•	-
I, the undersigned \( \square\ \square\  \text{(Name)} \)	OLA	lo hereby certi
1, the miderarghist (Name)		
that this Resolution of the Board of Directors of Res	sidential Mor-	taage
that this Rosokaton		) )
Corporation (Corporate Nam	ne)	
		_
a corporation duly organized and existing under the laws	of the State of Deva	<u>da </u>
a corporation duly organized and extends	:	
		,1993
was duly adopted on September 1	<del></del>	<del></del>
Be it resolved, that Residential Mort	Corporate Name)	tion
	hereby	edonts the DAD
organized and existing in the State of Devar		
- RMC of Sometimes Frozi	1 1- POPONT	(DN
* RMC of South PORT	ON CORIORNI	or use in Pion
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Dated.* 25 AUG 00		
Dated:		. E
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100,11 106	Na.	,
Signature of citier Charman, Vice	Chairman or any officer	: -:
( VICE.	PRUSIDENT	
	4 / 40 4	
× -\U04	NICOLX	_ 1.
Type or print	name	
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#### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

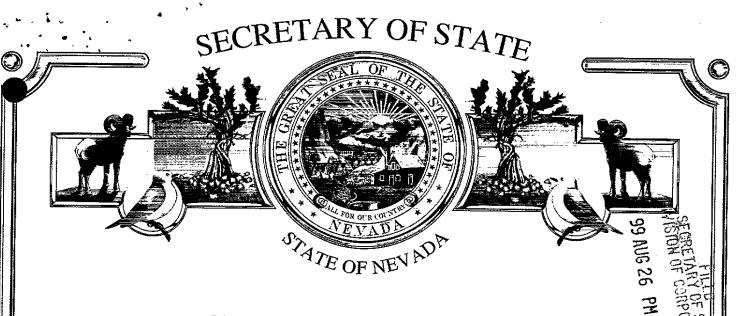
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	the state of the s
1.	Karidanti-1-Macton Carporation
1.	(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or
	words or abbreviations of like import in language as will elearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
**^	New d. 94-12547510 7
<del>-</del> 2.	Nevada 3. 94-1854756 (State or country under the law of which it is incorporated) (FEI number, if applicable)
	(State of country under the law of which it is incorporated)
€4	(State or country under the law of which it is incorporated)  September 1993  (Date of Incorporation)  5. Percetual (Duration! Year corp. will cease to exist or "perpetual")
4.	(Duration! Year corp. will cease to exist or
	"perpetual")
6.	(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)
<b>J</b> .	905 East Mc King Dr. Juite 600
<b>~</b>	·
	Turpen Spring FC 74689 (Current mailing address)
	(Current mailing address)
8.	(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
	(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
<u> </u>	Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT
· ·	acceptable)
	Name: Robert Pitchman
	Name: CoDert Pitenman
	Office Address: 1092 Riverside Ridge Dr.
	T ( )
	Tarpus Springs, Florida, 34689 (Zip Code)
10.	Registered agent's acceptance:
_	
Ha	ving been named as registered agent and to accept service of process for the above stated portation at the place designated in this application, I hereby accept the appointment as
res	ristered agent and agree to act in this capacity. I further agree to comply with the provisions of
all	sistered agent and agree to act in this capacity. I further agree to comply with the provisions of statutes relative to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent.)
and	d accept the obligations of my position as registered agent.)

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.

agent's signature)

	CTORS (Street address only-P. O. Box NOT acceptable)	
Chairman:	Viac (Circhert	
Address: _	Huntington Reach CA	THE PORT OF COR
Vice Chair	man:	16° 30° 1
Address: _		6 PH
Director: _		22
Address: _		
Director: _		
Address: _	<u> </u>	
Vice Preside		
	Huntington Beach CA	<u> </u>
A ICC LICSIG	ent: _ Judith E. NILO/9	
Address:	1212 Hickory Trail	
Address: _		 
	New Port Rockey FR 34655	
Address: Secretary: _ Address:	New Port Rockey FR 34655 True Houghland	
Secretary: _	New Port Rocky FR 34655 True Houghland 853 South 3rd St.	900
Secretary: _	New Port Rocky Fr 34655  True Houghland 853 South 3rd St.  Las Vegas NV 89101	- · · · · · · · · · · · · · · · · · · ·
Secretary: _ Address:  Treasurer: _	New Port Rocky FR 34655  True Houghland 853 South 3rd St. Las Vegas NV 89101  True Houghland	- · · · · · · · · · · · · · · · · · · ·
Secretary: _ Address:	New Port Rocky Fr 34655  True Houghland 853 South 3rd St.  Las Vegas NV 89101	- · · · · · · · · · · · · · · · · · · ·
Secretary: _ Address: Treasurer: _ Address:	New Port Rocky FR 34655  True Houghland 853 South 3rd St. Las Vegas NV 8910/  Irve Houghland  Sum as Som	- · · · · · · · · · · · · · · · · · · ·
Secretary: _ Address: Treasurer: _ Address:	New Port Teschy FR 34655  True Houghland 853 South 3rd 5t.  Las Vegas NV 89/0/  True Houghland  Som as Sour	- · · · · · · · · · · · · · · · · · · ·



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, and limited-liability partnerships pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **REŚIDENTIAL MORTGAGE CORPORATION**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since April 17, 1990, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on July 30, 1999.

Secretary of State

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