

	ation Section n of Corporations	_	
SUBJECT:	Diamond Funding	Corporation	
Dear Sir or Mac	`	orporation - must include suffix)	 0030381775 -11/08/9901099016 *****70.00 ******70.00
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The enclosed "A" "Certificate of I transact busines	Existence", and check are subm	ation for Authorization to Transact B itted to register the above referenced	usiness in Florida", foreign corporation to
Please return all	correspondence concerning th	is matter to the following:	
	Ava M. Martinel	1i	<u></u>
	Diamond Funding	Name of Person) Corporation	
	872 Park Avenue	Firm/Company)	
	Cranston, RI 02	(Address) 910	
	**************************************	(City/State/Zip)	
Should you need	d to call someone concerning th	his matter, please call:	A V 99
Ava M.	Martinelli at (	401-941-3770	OV S
(Name	of Person)	(Area Code & Daytime Telephon	e Number) 0 FED
STREET ADD	RESS:	MAILING ADDRESS:	55
Registration Sec Division of Cor 409 E. Gaines S Tallahassee, FL	porations it.	Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	51
Enclosed is a ch	eck for the following amount:		
\$70.00 Filing	g Fee S78.75 Filing Fee Certificate of Sta		\$87.50 Filing Fee, Certificate of Status &



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

November 16, 1999

AVA M. MARTINELLI DIAMOND FUNDING CORPORATION 872 PARK AVENUE CRANSTON, RI 02910

SUBJECT: DIAMOND FUNDING CORPORATION

Ref. Number: W99000026290

We have received your document for DIAMOND FUNDING CORPORATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida corporation or a foreign corporation authorized to transact business in Florida. Please correct the document.

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) 487-6043.

Shawn Logan Document Specialist

Letter Number: 499A00054857

HOV 30 PM 2: 5

## 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.		Diamond Funding Co	orporation	-		
	(Name of cor	poration; must include the word "	NCORPORATEI	", "COMPANY	", "CORPORATIO	N' or
	words or abb	reviations of like import in langua	ge as will clearly	ndicate that it is	a corporation instea	ıd of a
	natural person	n or partnership if not so contained	in the name at pr	esent.)	•	
	n	a				
_		dence/RI		- 1 '-	1 or o	D
2.	(Cash say	try under the law of which it is inc	3.		Tax 1d 05-0	
			corporated)	ę	FEI number, if appli	cable)
4.	3/4/		5,pe;	petual		
	(I	Date of incorporation)	(Dura	ion: Year corp.	will cease to exist o	r "perpetual")
5	upo	n qualification				
Ψ.	(Date first tran	sacted business in Florida. If cor	oration has not to	insacted busines	s in Florida incert "	mon qualification ")
	•	(SEE SECTION	ONS 607.1501, 60	7,1502 and 817.	155, F.S.)	about dearmounter.
7.	8	72 Park Avenue, Crai			• • • • • • • • • • • • • • • • • • • •	
F 4	a		ipal office address			
	. 5	ame as above	_	•		·
	b					
		(Curre	nt mailing address	)		
	t:	ransact mortgage bar	king busin	ess		
8.			•			
	(Purpos	c(s) of corporation authorized in h	ome state or coun	ry to be carried	out in state of Florid	ia)
^						
У,	Lame sud ži	reet address of Flerida registe	ered agent: (P.0	). Box or Mail	Drop Box NOT at	xceptable)
	Name:	Steven Sciarretta,	P.A.			
	. 14116.					T 2 9
Ofi	fice Address:	2300 Glades Road, S	Suite 203E,	Boca Rat	on, FL 3343	
		Boca Raton,		, Florida 3	3431	99 NOV 30 TALLAHASS
				(2	ip code)	SE T
						SEE E
10.	Registered	agent's acceptance:				E N
						<del>ಸ</del> :
Ha:	ving been nam	red as registered agent and to acc	ept service of proc	ess for the above	ve stated corporation	ı at the place designated
in t	his application	s, I hereby accept the appointmen	t as registered ag	nt and ogree to	act in this capacity.	. I further agree to
COM	ipty wan ine p	rovisions of all statutes relative to	the proper and c	omplete perfon	nance of my duties,	and I am familiar with
97:8	accept the 60	ligations of my position as registe	rea ageni.			
		_+//				
		(Registe	red agent's signat	ure)		r
		<b>~</b> , •		•		

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.

	CTORS	
Chairman:	none	
Address: _		
Vice Chairn	man.	
A dd	man:	
Address:		
_		
Director: _		
Address:		
. OFFICI	ERS	
resident:	Ava M. Martinelli	
	Ava M. Martinelli  38 Applegate Road Cranston PI 02020	
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ice Presiden ddress: cretary: ddress: easurer: dress:	38 Applegate Road, Cranston, RI 02920  nt:	onal officers and/or directors.

(Typed or printed name and capacity of person signing application)

## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

James R. Langevin, Secretary of State

The Office of the Secretary of State of the State of Rhode Island and Providence Plantations, HEREBY CERTIFIES, that

## DIAMOND FUNDING CORPORATION

a Rhode Island corporation, filed original articles of incorporation in this office on the fourth day of March A.D., 1987; and

IT IS FURTHER CERTIFIED that said corporation is now of record and in good standing in this office.

> SIGNED AND SEALED this twenty-sixth day of October A.D., 1999.

James R Langevin Secretary of State

