DOCUMENT # H86242  1. Entity Name STATE HOME ACCEPTANCE CORP.						Jan 23, 2001 08:00 AM Secretary of State					
Principal Plac	e of Business	Mailing Address		<u> </u>							
730 NW 107 AV	'E	730 NW 107 AVE 4TH FLOOR									
MIAMI 33172	FL	MIAMI 33172		FL							
2. Principal P 730 NW 107 AV	lace of Business	3. Mailing Address 730 NW 107 AVE								-	
Suite, Apt.	#, etc.	Suite, Apt. #, etc. 4TH FLOOR				DO NOT WRITE IN THIS SPACE					
City & State	e FL	City & State	City & State MIAMI FL			FEI Number			—	Applied For	
Zip	Country	Zip	Coun		-	59-2607034			\$8.75 A	Not Applicab	<u>le</u>
33172	S Name and Address of Courses	33172	US	·		. Certificate of Status			Fee Requ		
· · · · · · · · · · · · · · · · · · ·	6. Name and Address of Current	Registered Agent	-	Name	7	. Name and Address	of New Re	gistered	Agent		
MCCAIN, DAVID B., ESQ. 700 N.W. 107TH AVENUE				MCCAIN DAVID BESQ.  Street Address (P.O. Box Number is Not Acceptable) 700 N.W. 107TH AVENUE						<del></del> -	
MIAMI	F	L								<del>-</del>	
33172	US			City MIAMI			<u>-</u>	FL	Zip C		_
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  Tax files NOW  After MAY 1, 2  Make Check Paya				will be \$5	50.00	10. Election Car Trust Fund 0				.00 May Be	
11.	OFFICERS AND		12.		,	ADDITIONS/CHANGE	S TO OFFIC	ERS AN	D DIRECTO	DRS IN 11	
TITLE NAME	VAS KAMINSKY, NANCY	☐ Delete	TITLE		VAS KAMINS	KY NANCY			X Chang	e 🔲 Additio	E034 (11/00)
STREET ADDRESS	730 NW 107 AVE			ET ADDRESS	730 NW 1						Δ Σ
CITY-ST-ZIP	MIAMI	FL	CITY	-ST-ZIP	MIAMI			FL	33172		 
TITLE NAME	VT MUNOZ, JANICE	☐ Delete	: TITLE NAM		VT MUNOZ	JANICE			X Chang	e 🔲 Additio	
STREET ADDRESS CITY-ST-ZIP	730 NW 107 AVE MIAMI	FL 33172		ET ADDRESS	730 NW 1	107 AVE		T.T	22170		
TITLE	VS		-	- ST-ZIP	VS	· · · · · · · · · · · · · · · · · · ·		FL	33172		_
NAME STREET ADDRESS	MODIST DEBRA 700 NW 107TH AVE. 4TH FL	☐ Delete	NAM	E	MODIST				Chang	e [] Additio	חנ
CITY-ST-ZIP	MIAMI	FL		ET ADDRESS -ST-ZIP	MIAMI	107TH AVE. 4TH FL		FL	33172		
TITLE	AS	☐ Delete	TITLE				<del></del>		Chang	e 🔲 Additio	on
NAME STREET ADDRESS	IRVINE PATRICIA 730 NW 107 AVE		NAM: STRE	E Et address							
CITY-ST-ZIP	MIAMI	FL 33172		-ST-ZIP		•					
TITLE	DV	☐ Delete	TITLE						☐ Chang	e 🔲 Additio	חג
NAME STREET ADDRESS	REED LINDA 730 NW 107 AVE		NAMI STRE	ET ADDRESS							
CITY-ST-ZIP	MIAMI	FL 33172		-ST-ZiP							
TITLE NAME	PCD ALLEN I	☐ Delete	TITLE		PCD				X Chang	e 🔲 Additio	חכ
STREET ADDRESS	PEKOR ALLEN J. 730 NW 107 AVE		NAMI STRE	et address	PEKOR 730 NW 1	ALLEN J 107 AVE					
CITY-ST-ZIP	MIAMI	FL 33172		-ST-ZIP	MIAMI			FL	33172		
of the cor	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee emporation or the receiver or trustee or or on an attachment with an address, v	itrue and accurate and that mo wered to execute this report a	เบ อเกกวเ	tito enali n	ava tha com	to local offect on if mo	~~	المصطنيطة	ana an affic	an ar director	

VT

01/23/2001

Daytime Phone #

Date

SIGNATURE: \_\_Janice Munoz

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR