

Chart Number Only

L 95000000 716

9/15/95

RECEIVED
SEP 18 1995
TALLAHASSEE, FLORIDA

ARNOLD STRAUS

Requestor's Name

10081 Pines Blvd. H.C.

Address

Pembroke Pines FL 33024

City

State

ZIP

Phone

VALIDATION ONLY

FILED
SEP 18 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION(S) NAME

AMERICAN HOME MORTGAGE AND ASSOCIATES
L.C.

RECEIVED
SEP 18 1995
TALLAHASSEE, FLORIDA



EMPIRE Toll Free: 1-800-432-3028

- | | | |
|----------------------------------------------------|------------------------------------------|-----------------------------------------------------|
| <input checked="" type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> NonProfit | <input type="checkbox"/> Dissolution | <input type="checkbox"/> Mark |
| <input type="checkbox"/> Foreign | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Reservation | <input type="checkbox"/> Change of Registered Agent |
| <input type="checkbox"/> Reinstatement | | |
| <input checked="" type="checkbox"/> Certified Copy | <input type="checkbox"/> Photo Copies | <input type="checkbox"/> Certificate Under Seal |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input type="checkbox"/> Pick Up |
| | | <input type="checkbox"/> Mail Out |

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

RECEIVED COPY

F. CHESSER SEP 18 1995

ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY
AMERICAN HOME MORTGAGE AND ASSOCIATES, L.C.

FILED
1985 SEP 18 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I
NAME

The name of the Limited Liability Company is:
American Home Mortgage and Associates, L.C.

ARTICLE II
ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:
150 S. Pine Island Road, #105, Plantation, Florida 33324

ARTICLE III
DURATION

The period of duration for the Limited Liability Company shall begin upon the filing of the Articles of Organization with the Secretary of State and shall be until January 1, 2035, unless terminated or dissolved under Florida Law.

ARTICLE IV
MANAGEMENT

The Limited Liability Company is reserved to the Members. The names and addresses of the members are:

Stefan Stampfer
150 S. Pine Island Road, #105
Plantation, Florida 33324

Mark Steven Stern
Limited Partnership,
a Georgia Limited Partnership
280 Mountain Road
Englewood, N.J. 07024

Russell Todd Stern
Limited Partnership,
a Georgia Limited Partnership
280 Mountain Road
Englewood, N.J. 07024

Douglas Andrew Stern
Limited Partnership,
a Georgia Limited Partnership
280 Mountain Road
Englewood, N.J. 07024

ARTICLE V
ADMISSION OF ADDITIONAL MEMBERS

The right of the remaining members to admit additional members and the terms and conditions of the admission shall be:

That upon a vote of one hundred (100) percent of the members, an additional member may be admitted upon such terms and conditions as decided by the remaining members.

ARTICLE VI
MEMBERS RIGHTS TO CONTINUE BUSINESS

The remaining members of the limited liability company shall have the right to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company, as determined by the regulations of the limited liability company.

IN WITNESS WHEREOF, the undersigned has hereunto set his hand seal on
this 13th day of September, 1995.


STEFAN STAMPLER, MEMBER

STATE OF FLORIDA

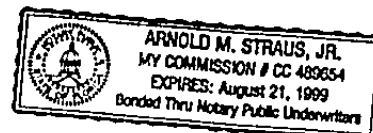
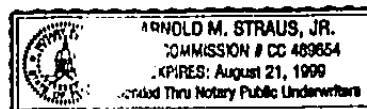
COUNTY OF Broward

The foregoing instrument was acknowledged before me this 13th day of September, 1995, by ESTEFAN STAMPLER, a member of American Home Mortgage and Associates, L.C., who is personally known to me.



NOTARY PUBLIC, State of Florida

My Commission Expires:



AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member of American Home Mortgage and Associates, L.C. deposes and says:

1. The above named limited liability company has at least two members.
2. The total amount of cash contributed by the members is \$500.00.
3. The agreed value of property other than cash contributed by members is \$0.
4. The total amount of cash or property anticipated to be contributed by members is \$500.00. This total includes amounts from 2 and 3 above.


STEFAN STAMPLER

(In accordance with Section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED AGENT/REGISTERED OFFICE IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

American Home Mortgage and Associates, L.C.

2. The name and address of the registered agent and office is:

Arnold M. Straus, Jr., Esq.

(Name)

10081 Pines Boulevard, Suite C,

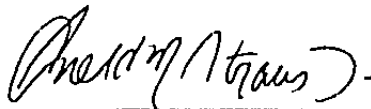
(P.O. Box Not Acceptable)

Pembroke Pines, FL 33024

(City/State/Zip)

FILED
1995 SEP 18 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



Signature: ARNOLD M. STRAUS, JR.

Date: Sept 13 1995

L95000000716

ARNOLD STRAUS, JR., P.A.
Attorney at Law

10081 Pines Boulevard - Suite C, Pembroke Pines, Florida 33024
Telephone: Broward (305) 431-2000 / Dade (305) 681-5249 / Toll Free 1-800-273-2010
FAX: (305) 431-8999

January 17, 1996

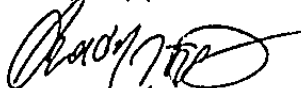
Ms. Freida Chessor
Corporate Specialist
Secretary of State
Division of Corporation
P.O. Box 6327
Tallahassee, Florida 32314

Re: American Home Mortgage and Associates, L.C.
Document No. L95000000716

Dear Ms. Chessor:

We enclose an Amended Affidavit of Membership and Contributions for this Limited Liability Company together with a check in the amount of \$250.00 for the Amendment. Please send a confirmation of receipt of this Amendment to my office.

Very truly yours,



ARNOLD STRAUS, JR.
For the Firm
AMS/ik
cc: Stefan Stampler
encls. As stated

FILED
96 JAN 23 PM 1:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

200001701702
-01/30/96--01102--003
****250.00 ****250.00

RECEIVED
96 JAN 23 PM 4:26
DIVISION OF CORPORATIONS

Contrib's increased too: 50,000.00

Contrib. Chg.

VS JAN 30 1996

FILE NOW: Fee after May 1, will be \$263.75

<p>L9500000716</p> <p>FLORIDA DEPARTMENT OF STATE TALLAHASSEE, FLORIDA</p>		<p>FILED</p> <p>96 MAR 21 AM 9:55</p> <p>SECRETARY OF STATE TALLAHASSEE, FLORIDA</p>	
<p>FILING FEE \$ 238.75</p>		<p>Annual Report \$100.00 + \$138.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE</p>	
<p>1. Name and Mailing Address of Limited Liability Company DOCUMENT #L95000000716 AMERICAN HOME MORTGAGE AND ASSOCIATES, L.C. 150 S PINE ISLAND ROAD #105 PLANTATION FL 33324</p>		<p>1a. Principal Place of Business Address 150 S PINE ISLAND ROAD #105 PLANTATION FL 33324</p>	
<p><small>If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a</small></p>			
<p>2. Principal Place of Business 150 S. Pine Island Rd, Suite 105 Suite, Apt. #, etc. Suite 105 City & State Plantation FL Zip 33324 Country USA</p>		<p>3. Date Organized or Qualified 09/18/1995</p> <p>3a. State of Formation FL</p> <p>4. FET Number 65-0609355</p> <p>5. Date of Last Report</p> <p>6. Certificate of Status Desired <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable</p>	
<p>7. Name and Address of Current Registered Agent STRAUS, ARNOLD M 10081 PINES BLVD SUITE C PEMBROKE PINES FL 33024</p>		<p>8. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 60000175725E Suite, Apt. #, etc. -03/26/96--01097--012 ****238.75 ****238.75 City</p>	
<p>9. Pursuant to the provisions of Sections 608.410 and 608.500, Florida Statutes, the above-named limited liability company submits this statement for the purpose of appointing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.</p>			
<p>SIGNATURE <u><i>Stefan Stampler</i></u> <small>(If Registered Agent Accepts Appointment) (If Not, Registered Agent signature required when installing)</small></p>		<p>DATE <u><i>2/10/96</i></u></p>	
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MEM	STAMPLER SAMPLER, STEFAN	150 S PINE ISLAND ROAD #105	PLANTATION FL
MEM	STERN, RUSSELL T	280 MOUNTAIN ROAD	ENGLEWOOD NJ
MEM	STERN, MARK S	280 MOUNTAIN ROAD	ENGLEWOOD NJ
MEM	STERN, DOUGLAS A	280 MOUNTAIN ROAD	ENGLEWOOD NJ
<p><i>96</i> <i>3/25/96</i></p>		<p>Approved By: _____ Entity: <u><i>2/26</i></u> G/L Acct #: <u><i>6430.02</i></u> Amount: _____ <i>*****3/8</i></p>	
<p>11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.</p>			
<p>SIGNATURE: <u><i>Stefan Stampler</i></u> STEFAN STAMPLER <i>3/18/96 (954) 236 2326</i></p>			

L95000000716
ARNOLD STRAUS, JR., P.A.
Attorney at Law

10081 Pines Boulevard - Suite C, Pembroke Pines, Florida 33024
Telephone: Broward (305) 431-2000 / Dade (305) 681-5249 / Toll Free 1-800-273-2010
FAX: (305) 431-8999

May 21, 1996

Ms. Freida Chosser
Corporate Specialist
Secretary of State
Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314

100001851511
-06/05/96--01032--012
***250.00 ***250.00

Re: American Home Mortgage and Associates, L.C.
Document No. L95000000716

Dear Ms. Chosser:

We enclose an Amended Affidavit of Membership and Contributions for this Limited Liability Company together with a check in the amount of \$250.00 for the Amendment. Please send a confirmation of receipt of this Amendment to my office.

Very truly yours,


ARNOLD STRAUS, JR.

For the Firm
AMS/ik
cc: Stefan Stampler
encls. As stated

RECEIVED
56 MAY 24 PM 1:07
DIVISION OF CORPORATIONS

N. HENDRICKS MAY 30 1996

Supp. Affidavit

FILED

AMENDED AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

96 APR 24 AM 10:01

The undersigned member of American Home Mortgage and Associates, L.C., deposes and says:

SECRETARY OF STATE
DELAWARE COUNTY

1. The above named limited liability company has at least two members.
2. The total amount of cash contributed by the members is \$100,000.00.
3. The agreed value of property other than cash contributed by members is \$0.
4. The total amount of cash or property anticipated to be contributed by members is \$100,000.00. This total includes amounts from 2 and 3 above.


STEFAN STAMPLER

(In accordance with Section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)