

Document Number Only

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C T CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301 (850)222-1092

City

State

Zip

Phone

CORPORATION(S) NAME

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Ameristar Financial Servicing Company, LLC

d/b/a

AFSC, LLC

Profit

NonProfit

Limited Liability Company

Foreign

Amendment

Dissolution/Withdrawal

Merger

Mark

Limited Partnership

Reinstatement

Limited Liability Partnership

Certified Copy

Annual Report

Reservation

Photo Copies

Other

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Fictitious Name

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RESOLUTION OF MANAGING MEMBERS OR MANAGERS

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I, the undersigned Charles F. Wonderlic, authorized person of Ameristar
(Name) Financial Company LLC

do hereby certify that this Resolution of the Managing Members or Managers of

Ameristar Financial Servicing Company, L.L.C.
(Name of Limited Liability Company)

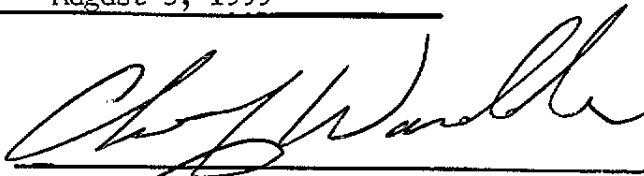
a limited liability company duly organized and existing under the laws of the State of

Delaware, was duly adopted on 8-5, 1999.

Be it resolved, that Ameristar Financial Servicing Company, L.L.C.
(Name of Limited Liability Company)

organized and existing in the state of Delaware, hereby adopts the
name of AFSC, LLC for use in Florida.

Dated: August 5, 1999



Signature of a Member or an Authorized Representative of a Member
Charles F. Wonderlic, authorized person of Ameristar
Financial Company, LLC

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACT BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

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1. Ameristar Financial Servicing Company, LLC D/B/A AFSC, LLC
 (Name of foreign limited liability company must end with the words "limited company" or their abbreviation "L.C." if not so contained in the name at present.)
2. Delaware 3. 36-4307042
 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. July 19, 1999 5. Perpetual
 (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon filing
 (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 1425 Tri-State Parkway, Suite 140
Gurnee, Illinois 60031
 (Street address of principal office)

8. List name, title, and business address of each managing member[MGRM] or manager[MGR] who will manage the foreign limited liability company in Florida: (attach additional page if necessary)

NAME & ADDRESS:	TITLE:	NAME & ADDRESS:	TITLE:
Ameristar Financial Company, L.L.C. 1425 Tri-State Parkway, Suite 140 Gurnee, IL 60031	MGRM		

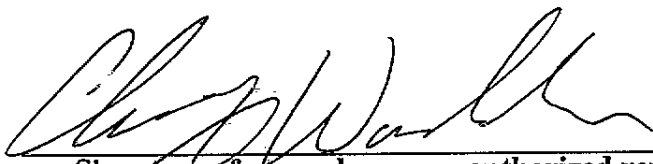
9. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of records in the state under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

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The undersigned member or authorized representative of a member of Ameristar
Financial Servicing Company, LLC certifies:

- 1) the above named limited liability company has at least one member;
- 2) the total amount of cash contributed by the member(s) is \$ 100,000 ;
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ 0 ;
(A description of the property is attached and made a part hereto.)
and
- 4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is \$ 100,000 ;
(This total includes amounts from 2 and 3 above.)



Signature of a member or an authorized representative of a member.
(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.)

Charles F. Wonderlic, authorized person of

Typed or printed name of signee
Ameristar Financial Company, L.L.C.

Filing Fee: \$250.00 for Application and Affidavit

**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 TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Ameristar Financial Servicing Company, L.L.C.

2. The name and the Florida street address of the registered agent and office are:

CT Corporation System

(Name)

1200 South Pine Island Road

Florida street address (P.O. Box **NOT** ACCEPTABLE)

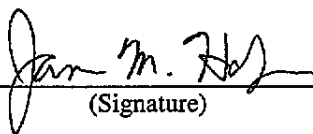
Plantation

FL

33324

City/State/Zip

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)

James M. Halpin
Assistant Secretary

Filing Fee: \$ 35 for Designation of Registered Agent

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Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AMERISTAR FINANCIAL SERVICING COMPANY, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTH DAY OF AUGUST, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

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Edward J. Freel

Edward J. Freel, Secretary of State

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AUTHENTICATION:

08-04-99

DATE: