FILED May 21, 2002 8:00 am Secretary of State 2001 Uniform Business Repurt (UBR) DOCUMENT # P00000062044 04-03-2002 90041 006 ***150.00 1. Entity Name SHOWCASE MORTGAGE CORPORATION Principal Place of Business Mailing Address 1610 East Vine Street 1610 East Vine Street Kissimmee, FL 34744 Kissimmee, FL 34744 3. Mailing Address 2. Principal Place of Business DO NOT WRITE NO HIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State Not Applicable 59-3656405 \$8.75 Additional Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Harry J. Swart, CPA Street Address (P.O. Box Number is Not Acceptable) 717 East Oak Street Kissimmee, FL 34744 Zip Code 8. The above ramed entity submits this statement for the purpose of changing its legistered office or registered agent, or both, in the State of Florida. SICNATURE Signature, typed or printed name of registered agent and title if applicable. DATE (NQT) Ring stered Agent ex nature required when reinstating) **FILE NOW!** ! FEE IS \$150.00 9. This corpor ition is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Fee will be \$550.00 Tax filing re juirement and elects to do so. After MAY 1, 20 Added to Feas Trust Fund Contribution. K e to Department of State Make Check Payab (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS 11. Change X Addition TITLE P S T Delete TITLE NAME LAME Mark Taliento STREET ADDRESS . TREET ADDRESS 3212 Great Oaks Drive CITY-ST-ZIP ITY-SF-ZIP Kissimmee, FL ☐ Change ☐ #ddition TITLE ☐ Oelete HIF VAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP I ITY-ST-ZIP ☐ Change ☐ F ddition HILLE TITLE ☐ Delete NAME LAM STREET ADDRESS : TREE! ADDRESS CITY-ST-ZIP CITY \$1-ZIP Change Addition TITLE □ Delete 1 71.5 NAME LIAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHTY ST-ZIP ☐ Change ☐ Addition TIFLE ☐ Delete 7 TLE NAME t:AMi STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST-ZIP ☐ Change ☐ Addition ☐ Defete TITLE 1 TLE MAME HAME STREET ADDRES 1 SIRFET ADDRESS

13. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate on that it is indicated on this report or supplemental report is true and accurate on that it is indicated on this report or supplemental report is true and accurate on that it is indicated on this report or supplemental report is true and accurate on that it is indicated on this report or supplemental report is true and accurate on that it is indicated on this report or supplemental report is true and accurate on that it is indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate on that in signature shall have the same legal effect as if made under oath; that I am an officer or director of the corp. Florida Statutes: and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other than the information supplemental report is true and accurate on the information supplemental report is true and accurate on the information supplemental report is true and accurate on the information supplemental report is true and accurate on the information indicated on the information is indicated in the information indicated on the information indicated indicat

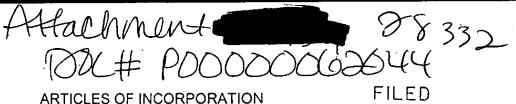
SIGNATURE

CiTY-ST-7IP

Mark Taliento 04/30/2001

CITY-ST-ZIP

407-344-4128



FILED

SHOWCASE MORTGAGE CORPORATION

00 JUN 23 PM 4: 11

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I. NAME

The name of this corporation shall be Showcase Mortgage Corporation.

ARTICLE II. DURATION

This corporation shall have perpetual existence commencing on the date of filing of the Articles of Incorporation by the Department of State.

ARTICLE III. PURPOSE

This corporation is organized for the purpose of transacting any and all lawful business.

ARTICLE IV. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 1,000 shares of common stock having a par value of \$1.00 per share.

ARTICLE V. ADDRESS

The initial post office address of the principal place of business of this corporation is 1610 East Vine Street, Kissimmee, FL 34744. The Board of Directors may, from time to time, move the principal office to any other address in Florida.

ARTICLE VI. DIRECTORS

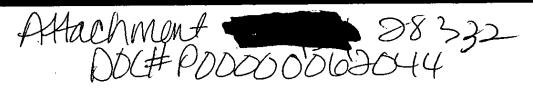
This corporation shall have one director initially. The number of directors may be changed from time to time by the bylaws. The name and address of the initial director, who will serve until the first annual meeting of shareholders of the corporation or until his successor is duly elected and qualified is:

NAME

ADDRESS

Mark Taliento

3212 Great Oaks Drive Kissimmee, FL 34744



ARTICLE VII. SUBSCRIBERS

The subscriber to these Articles of Incorporation is:

NAME

ADDRESS

Harry J. Swart, CPA

717 E. Oak Street Kissimmee, FL 34744

ARTICLE VIII. OFFICERS

The officers of this corporation shall be President, Vice President, Secretary, and Treasurer. They shall be elected by the Board of Directors.

ARTICLE IX. REGISTERED AGENT

The initial registered agent and registered agent's address for service of process for this corporation is:

NAME

ADDRESS

Harry J. Swart, CPA

717 E. Oak Street Kissimmee, FL 34744

ARTICLE X. AMENDMENTS

These Articles of Incorporation may be amended in the manner set forth in the bylaws of this corporation.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this 20th day of June 2000.

Harry J. Swart, CPA

STATE OF FLORIDA COUNTY OF OSCEOLA

BEFORE ME, a Notary Public authorized to take acknowledgments in the state and county set forth above personally appeared Harry J. Swart, known to me personally and executed the foregoing Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the state and county aforesaid this 20th day of June 2000.

VALERIE LEE

MY Comm Exp. 6/24/2002

PUBLIC

No. CC 754088

Personally Known (10ther I.D.

Valerie A. Lee

Notary Public, State of Florida

DESIGNATION AND ACCEPTANCE OF REGISTERED AGENT

FILED

TALLAHASSEE, FLORIDA

The undersigned subscriber of Showcase Mortgage Corporation, designates 22e PM 4: 11 following individual as registered agent for this corporation:

SECRETARY OF STATE

Harry J. Swart, CPA 717 E. Oak Street Kissimmee, FL 34744

Harry J. Swart, CPA

ACCEPTANCE OF REGISTERED AGENT

The undersigned does hereby accept the designation as registered agent of Showcase Mortgage Corporation

DATED this 20th day of June 2000.

Harry J. Swart, CPA