1/3 2001 UNIFORM BUSINESS REPORT (UER) FILED Mar 01, 2001 8:00 am Secretary of State DOCUMENT # P95000067201 1. Entity Name SOUTH ATLANTIC MORTGAGE CORPORATION 01-30-2001 90052 028 ***150.00 Principal Place of Business Mailing Address 1414 NW 107TH AVE 1414 NW 107TH AVE STE # 401 STE # 401 MIAMI FL 33172 MIAMI FL 33172 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number City & State Applied For 65-0608652 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DANS, MARYLIN R Street Address (P.D. Box Number is Not Acceptable) 1414 NW 107 AVE **STE 401 MIAMI FL 33172** of changing its registered office or registered agent, or both, in the State of Florida. dent) youd or printed name of registered agent and bile if applicable (NOTE: Rec FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. *Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11. ice-Hesident Change CR2E034 (10/00 Detele TITLE TITLE NAME DANS, MARILYN R MAME 740A 14 NW 107 STREET ADDRESS STREET ADDRESS 5820 SW 45 TERRACE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33155 TITLE ☐ Change TITLE □ Delete NAME NAME Terrace STREET ADDRESS STREET ADDRESS CITY-ST-ZIP-CitY2ST-ZIS □ Delete TITLE Addition | NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-70 CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE -TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete HILE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby 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 and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address will all other like empowered. ilin R. I SIGNATURE (X

Rafael M. Reyes

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