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CANSION OF CORPORATIONS

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TRANSMITTAL LETTER

TO:	Registration Sec Division of Cor				
STIRT	ECT: AAXA D	-	age. Inc.		
зора	ECI. <u></u>			ion - must include suffix)
Dear S	ir or Madam:				
"Certif		e", and check are		or Authorization to Transa register the above refere	act Business in Florida", enced foreign corporation to
Please	return all corresp	ondence concern	ing this matt	er to the following:	
Brian	Mitchell			•	
-			(Name	of Person)	
AAXA	Discount Mor	tgage, Inc.			
			(Firm/C	Company)	
6322	Oleander Driv	e			بين برينگ
			(Ad	dress)	15 lo
Wilmi	ngton NC 2840	93			MAR -4 PM
			(City/State	e and Zip code)	F CO
					P. 37
For fu	ther information	concerning this i	natter, please	call:	O4 MAR -4 PM 1:52
Brian	Mitchell		at (910) 452-7283	
	(Name of Perso	on)		a Code & Daytime Telepl	hone Number)
Registr Divisio 409 E.	ET ADDRESS: ration Section on of Corporation Gaines St. assee, FL 32399	s		MAILING ADDRES Registration Section Division of Corporati P.O. Box 6327 Tallahassee, FL 323	ions
Enclos	ed is a check for	the following am	ount:		
Ø \$70	.00 Filing Fee	☐ \$78.75 Filir Certificate		☐ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee,Certificate of Status &Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

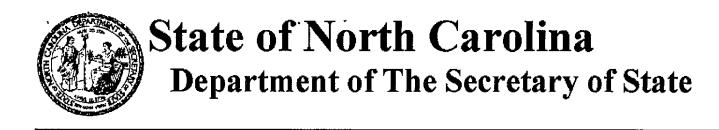
1.	AAXA Discount Mortgage, Inc.							
	(Enter name of corporation; must include "INCORPORATE "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	D,	" "COMPANY," "CORPORATION,"					
	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)							
_			56-2265216					
	(State or country under the law of which it is incorporated)	٥.	(FEI number, if applicable)					
		5	perpetual					
٠.	(Date of incorporation)	٥.	(Duration: Year corp. will cease to exist or "perpetual")					
6.	upon qualification							
	(Date first transacted business in Florida. If corporation has (SEE SECTIONS 607.15		transacted business in Florida, insert "upon qualification."), 607.1502 and 817.155, F.S.)					
7.	6322 Oleander Drive, Wilmington NC 28403							
	(Principal office a	dd	ress)					
	6322 Oleander Drive, Wilmington NC 28403		LCCR 15 IOR					
	(Current mailing a	dd	ress)					
	The last of the second		Ť SÝM					
8.	Broker mortgages for residential properties (Purpose(s) of corporation authorized in home state or	cc	ountry to be carried out in state of Florida)					
^								
У.	Name and street address of Florida registered agent		(P.O. Box or Mail Drop Box NOT acceptable)					
	Name: Denny Babcock							
0	ffice Address: 5319 Rose Marie Avenue North							
	Boynton Beach		, Florida 33437					
	(City)		(Zip code)					
H de fu	esignated in this application, I hereby accept the appoin	ntr s r	ice of process for the above stated corporation at the place ment as registered agent and agree to act in this capacity. I relative to the proper and complete performance of my duties, sition as registered agent.					

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors:

A. DIRI	ECTORS		
Chairman	:		
Address:			
Vice Chai	irman:		
Address:			
Director:	Gregory P Gianoplus		
Address:	6322 Oleander Drive		
	Wilmington NC 28403		
Director:			
Address:			
B. OFF	ICERS		
President:	Gregory P Gianoplus	<u>e</u>	<u> </u>
Address:	6322 Oleander Drive	-	SIO E
	Wilmington NC 28403	1	955
Vice Pres	ident:	-p	2000 2000 2000
Address:		 	
Secretary:	Alex S Gianoplus		<u> </u>
•	6322 Oleander Drive, Wilmington NC 28403		
Treasurer			
Address:			
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or dire	ectors.	
13	(Signature of Director or Officer listed in number 12 of the application)		
14 Gr e	egory P Gianoplus, President		
	(Typed or printed name and capacity of person signing application)		



CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

AAXA DISCOUNT MORTGAGE, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 14th day of September, 2000, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State, if applicable; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

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IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 25th day of February, 2004.

Colaine I. Marshall

Secretary of State

Certification Number: 8048720-1 Page: 1 of 1 Ref.# 5686824-cm Verify this certificate online at www.secretary.state.nc.us/Verification.