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TRANSMITTAL LETTER

TO: QUALIFICATION/TAX LIEN SECTION DIVISION OF CORPORATIONS

BOOOO1703776 -02/01/96--01037--020 *****78.75 *****78.75

SUBJECT: CRYSTAL MORTGAGE COMPANY. (Name of corporation - must include suffix) Dear Sir or Medam: The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida. Please return all correspondence concerning this matter to the following: Russell W. Gray, Esq. (Name of Person) (Firm/Company) 2104 Tenth Street (Address) Cuyahoga Falls. Ohio 44221 (City, State and Zip Code) Should you need to call someone concerning this matter, please call: Russell W. Gray, Esq. 945 - 7095 (Name of Person) Area Code & Daytime Telephone Number

COURIER ADDRESS:

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Sec. Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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:

OHIO or country under th	e law of which it is is	ncorporated)	34-16 (FEI nur	97600 nber, if applica	able)	
	don)					
•	(noi	(Duratio	n: Year corp.	will cease to	exist or "per	اڑاھuser جن
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9445 beavercres	t Drive, Suite	Z, Lorain,	Oh10_440)53		<u> </u>
						PH
	(Current mailing a	iddress)				လုံ
General Busines	39					3.
	tion authorized in ho	me state or co	intry to be ca	rried out in th	e state of Fi	orida)
	address of Flori					
me and sveet	iddress of Flori	aa registere	a agent:			
Name	B: <u>Beth A.</u>	Roldin				
Office Address	3: <u>2442 Eldrid</u>	~~				
Office Address	. <u>2442 ETUETO</u>	<u> </u>				
	_ Deltona			_ , Florida ,		
· ·					(Zip Co)de)

Beth A. Beldin

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 addresses	of officers and/or directors:	
A.	DIRECTORS		
	Chairman: _	David J. Moore	
	Addross: .	5445 Beavercrest Dr., Suite 2	
	-	Lorain, Ohio 44053	
	Vice Chairn	man:	
	Address:		•
	Director:		
			
			E S
	Address:	96 FEB	
В.	OFFICERS	- PH	
	President: _	David J. Moore co	当時
	Address:	5445 Beavercrest Dr., Suite 2	
	_	LOrain, Ohio 44053	cs v _e
	Vice Presid	lent:	
	, Address: _		
	Secretary:	Michael Conrad	
	:Address: .	5445 Beavercrest Dr., Suite 2	
		Lorain, Ohio 44053	
	Treasurer:	David J. Moore	
	Address:	5445 Beavercrest Dr., Suite 2	
		Lorain, Ohio 44053	

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors/

13. David J. Moore. President (Signature of Chairman, vice Chairman, or any officer listed in number 12 of the application)

14. David J. Moore, President
(Typed or printed name and capacity of person signing application)

UNITED STATES OF AMERICA, STATE OF OHIO, OFFICE OF THE SECRETARY OF STATE.

I, Bob Tast, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Forcign corporations and Miscellaneous fillings; that said records show CRYSTAL MORTGAGE COMPANY, INC., an Ohio Corporation, Charter No. 810966, having its principal location in Elyria, County of Lorain, was incorporated on January 13, 1992, is currently in GOOD STANDING upon the records of this office.

SECRETARY OF STATE OF



WITNESS my hand and official seal at Columbus, Ohio this 19th Day of January, A.D., 1996

Bob Taft

Bob Taft Secretary of State