

F 96000006283

TRANSMITTAL LETTER

TO: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: PARTNERS GROUP FINANCIAL, LTD.  
(Name of corporation - must include suffix)

Dear Sir or Madam:

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:

DOMINIC C. CHILBERTI III  
(Name of Person)  
PARTNERS GROUP FINANCIAL, LTD.  
(Firm/Company)  
1018 BETHLEHEM AVE, P.O. Box 73  
(Address)  
SPRING HOUSE, PA. 19477  
(City/State/Zip)

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DIVISION OF CORPORATIONS  
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Should you need to call someone concerning this matter, please call:

DOMINIC C. CHILBERTI III at (215) 646-8512  
(Name of Person) (Area Code & Daytime Telephone Number)

added "Inc."  
per Mr. Chilberti  
by phone 12/3

COURIER ADDRESS:

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

MAILING ADDRESS:

Qualification/Tax Lien Section  
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:

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1. PARTNERS GROUP FINANCIAL, LTD. INC.  
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of natural person or partnership if not so contained in the name at present.)

2. PENNSYLVANIA 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FBI number, if applicable)

4. 11-16-94 5. PERPETUAL  
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. NONE YET  
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)

7. 1018 BETHLEHEM PIKE; P.O. BOX 73  
SPRING HOUSE, PA. 19477  
(Current mailing address)

8. MORTGAGE LENDER  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: CHRISTINE M. LERO-McATER  
Office Address: 5069 SIESTA DEL RIO DR.  
JACKSONVILLE, Florida, 32258  
(Zip Code)

10. Registered agent's acceptance:  
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Christine M. Lero-McAter  
(Registered agent's signature)

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.

12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: DOMINIC C. CHILBERTI JR

Address: 203 SOUTH SCHOOL LANE  
SOUDERTON, PA. 18964

Vice Chairman: JOSEPH F. AMOROSO

Address: 407 WEST FREEDLEY ST.  
NORRISTOWN, PA. 19401

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: DOMINIC C. CHILBERTI JR

Address: 203 SOUTH SCHOOL LANE  
SOUDERTON, PA. 18964

Vice President: JOSEPH F. AMOROSO

Address: 407 W. FREEDLEY ST.  
NORRISTOWN, PA. 18964

Secretary: JOSEPH F. AMOROSO


Address: 407 W. FREEDLEY ST.  
NORRISTOWN, PA. 18964

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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

13.   
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. DOMINIC C. CHILBERTI JR  
(Typed or printed name and capacity of person signing application)



COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF STATE

NOVEMBER 07, 1996

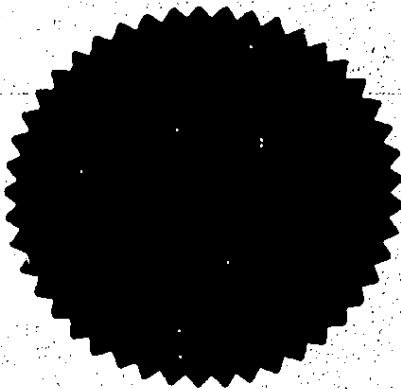
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TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

PARTNERS GROUP FINANCIAL, LTD.

is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

SWAL