

4
State of Indiana
Office of the Secretary of State

CERTIFICATE OF ASSUMED BUSINESS NAME

of
TERWIN ADVISORS LLC

I, TODD ROKITA, Secretary of State of Indiana, hereby certify that Certificate of Assumed Business Name of the above Delaware Foreign Limited Liability Company (LLC) has been presented to me at my office, accompanied by the fees prescribed by law and that the documentation presented conforms to law as prescribed by the provisions of the Indiana Business Flexibility Act.

Following said transaction the entity named above will be doing business under the assumed business name(s) of:

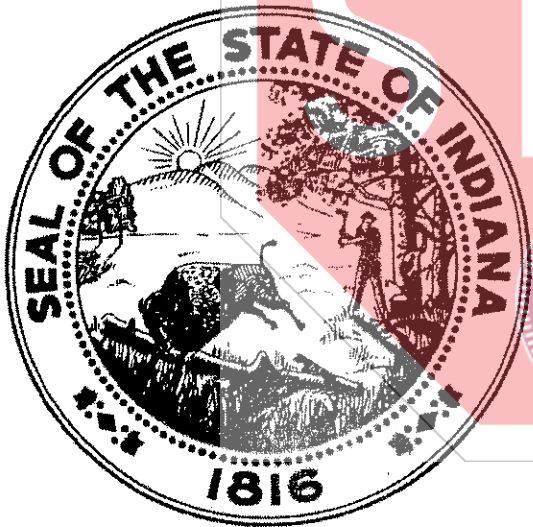
STREAMLINE DIRECT MORTGAGE

Document is
NOT OFFICIAL!

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the Lake County Recorder!

NOW, THEREFORE, with this document I certify that said transaction will become effective Wednesday, September 13, 2006.

In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, September 13, 2006.



Todd Rokita
TODD ROKITA,
SECRETARY OF STATE

MICHAEL A. BROWN
RECORDER

2006 082783

2006 SEP 20 PM 3:14

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

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APPROVED

AND

FILED

**CERTIFICATE OF ASSUMED BUSINESS NAME
(All Entities)**

State Form 30353 (R11 / 1-03)

State Board of Accounts Approved 2002

IND. SECRETARY OF STATE

2006 SEP 13

TODD ROKITA
SECRETARY OF STATE
CORPORATIONS DIVISION
302 W. Washington St., Rm. E018
Indianapolis, IN 46204
Telephone: (317) 232-6576



INSTRUCTIONS:

Use an 8 1/2" x 11" sheet of white paper for attachments.

Present original and one (1) copy to address in upper right corner of this form.

Please TYPE or PRINT.

Please visit our office on the web at www.sos.in.gov.

FILING FEES PER CERTIFICATE:

For-Profit Corporation, Limited Liability Company, Limited Partnership **\$30.00**

Not-For-Profit Corporation **\$26.00**

1. Name of entity Terwin Advisors LLC	2. Date of incorporation / admission / organization 07/06/2005
3. Address at which the entity will do business or have an office in Indiana. If no office in Indiana, then state current registered address (street address) 756 N MAIN ST;STE K	
City, state and ZIP code CROWN POINT, IN 46307	
4. Assumed business name(s) Streamline Direct Mortgage	
5. Principal office address of the entity (street address) 45 Rockefeller Plaza; Suite 420	
City, state and ZIP code New York, NY 10111	
6. Signature of officer or other authorized party 	7. Printed name and title Alondra Navarro
This instrument was prepared by: Alondra Navarro c/o Corporate Research Solutions, Inc.	

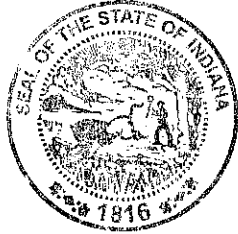
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STOP



State of Indiana
Office of the Secretary of State
I hereby certify that this is a true
and complete copy of the 2
page document filed in this office.
Dated 9-15-06
By: Melissa Mercado
This stamp replaces our previous
certification stamp.



Paul Robert
Secretary of State



AFFIRMATION OF REDACTION

I affirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law.

Shari Obermeyer

Signed name of individual

