

ACCOUNT NO. :

072100000032

REFERENCE

752108

4344517

AUTHORIZATION

COST LIMIT \$ 70.00

ORDER DATE: June 30, 2000

ORDER TIME :

10:01 AM

ORDER NO. : 752108-005

700003319507--7

CUSTOMER NO: 4344517

CUSTOMER: Ms. Kathy Mccamey Centex Corporation 2728 North Harwood Mailroom/no. 209 Dallas, TX 75201

FOREIGN FILINGS

NAME:

BENEFIT LAND TITLE INSURANCE

COMPANY

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Darlene Ward

TRANSMITTAL LETTER

| To: Qualification/Tax Lien Section Division of Corporations | 8 |
|--|---|
| SUBJECT: Benefit Land Title Insurance Company | |
| (Name of corporation - must | include suffix) |
| Dear Sir or Madam: | 9. 1. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. |
| The enclosed "Application by Foreign Corporation for Authoriz "Certificate of Existence", and check are submitted to register the to transact business in Florida. | ration to Transact Business in Florida", are above referenced foreign corporation |
| Please return all correspondence concerning this matter to the fo | llowing: |
| (Name of Person) | |
| Corporation Service Company | |
| (Firm/Company) | · · · · · · · · · · · · · · · · · · · |
| 1201 Hays Street | |
| (Address) | 2 |
| Tallahassee FL 32301 | |
| (City/State/Zip) | |
| Should you need to call someone concerning this matter, please | call: |
| Kathleen McCamey at (214) 981 | |
| (Name of Person) (Area Code & I | Daytime Telephone Number) |
| | |
| STREET ADDRESS: MAIL | ING ADDRESS: |
| Division of Corporations 409 E. Gaines St. Division Div | cation/Tax Lien Section on of Corporations ox 6327 ussee, FL 32314 |
| Enclosed is a check for the following amount: | |
| ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & ☐ \$78.75 | Filing Fee & S87.50 Filing Fee, cd Copy 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. | Land Title Insurance Company | P 08 |
|--|--|------|
| words or abbre | poration; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or eviations of like import in language as will clearly indicate that it is a corporation instead of a or partnership if not so contained in the name at present.) | |
| natural person (| or particismp it not so contained in the name at present, | |
| 2. Californi | ia 3. 93-1163025 | |
| (State or countr | ry under the law of which it is incorporated) 3. (FEI number, if applicable) | |
| 4. August 19, | , 1993 | |
| (Da | ate of incorporation) (Duration: Year corp. will cease to exist or "perpetual") | • |
| 6. upon fili | ing | |
| (Date firs | st transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) | - ' |
| 7 2728 N. I | Harwood | |
| Dallas, | Texas 75201 | |
| | (Current mailing address) | |
| Title In: | surer | |
| 8. | | |
| (Purpose | e(s) of corporation authorized in home state or country to be carried out in state of Florida) | |
| 9. Name and st | treet address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) | |
| | Corporation Service Company | |
| Name: | | 9 · |
| Office Address: | 1201 Hays Street | |
| | Tallahassee , Florida, 32301 (Zip code) | |
| 10. Registered | agent's acceptance: | |
| this application, I with the provision | ned as registered agent and to accept service of process for the above stated corporation at the place designated i I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply ns of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accep f my position as registered agent. | |

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

which it is incorporated.

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

| A. DIRECTORS (Street address only - P.O. Box NOT acceptable) | 8 |
|---|--|
| Chairman: See attached officers/directors rider | <u> </u> |
| Address: | |
| | 1 |
| rice Chairman: | 10 C |
| Address: | The state of the s |
| | |
| Director: | |
| Address: | |
| | |
| Director: | |
| Address: | ** * '72 |
| 3. OFFICERS (Street address only - P.O. Box NOT acceptable) | ***** |
| | |
| | a a |
| resident: See attached officers/directors rider | · · · · · · |
| resident: See attached officers/directors rider - | |
| resident: See attached officers/directors rider | |
| resident: See attached officers/directors rider - | |
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| resident: See attached officers/directors rider | |
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| resident: See attached officers/directors rider | |
| resident: See attached officers/directors rider | |
| resident: See attached officers/directors rider | |

(Typed or printed name and capacity of person signing application)

BENEFIT LAND TITLE INSURANCE COMPANY DIRECTORS/OFFICERS



DIRECTORS

Karren L. Bates

James H. Graass

David W. Quinn

OFFICERS

Karren P. Bates President

Steven D. Chaya Executive Vice President

Gregory A. Winters
Executive Vice President

Monte E. Sturgeon Vice President, Chief Financial Officer and Assistant Secretary

Raymond G. Smerge Vice President and Secretary

Vicki A. Roberts Vice President and Treasurer

Janet L. Erickson Assistant Vice President

Richard C. Harvey Assistant Secretary

O JU 1 PA 1:31

BENEFIT LAND TITLE INSURANCE COMPANY DIRECTORS/OFFICERS

Jeff A. Mason Assistant Vice President

G. Martin Green General Counsel and Assistant Secretary

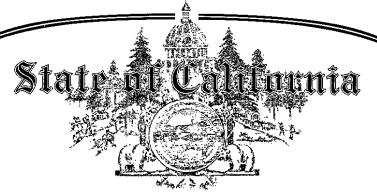
Larry J. Brown Assistant Treasurer

James H. Graass Assistant Secretary

Kathleen B. McCamey Assistant Secretary

ADDRESS FOR DIRECTORS/OFFICERS

2728 N. Harwood Dallas, Texas 75201



SECRETARY OF STATE

CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, BILL JONES, Secretary of State of the State of California, hereby certify:

That on the _____18th ____ day of ______ August _____,19 _93

BENEFIT LAND TITLE INSURANCE COMPANY

became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That no record exists in this office of a certificate of dissolution of said corporation nor of a court order declaring dissolution thereof, nor of a merger or consolidation which terminated its existence; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.



IN WITNES'S WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of

July 7, 2000

Billyons

Secretary of State