

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000057198 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0381

From:

Account Name

: CORPDIRECT AGENTS, INC.

Account Number : 110450000714

Phone

: (850)222-1173

Fax Number

: (850)224-1640

48797

FOREIGN PROFIT/NONPROFIT CORPORATION

MWF FINANCIAL & MORTGAGE CENTER, INC.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

03/03/2006 9:56:56

under the law of which it is incorporated.

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

H060000571983

APPLICATION BY FOREIGN CORPORATION BUSINESS IN	EL ORIDA
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STAT REGISTER A FOREIGN CORPORATION TO TRANSACT BUS	UTES, THE FOLLOWING IS SUBMITTED TO SUBMITTED SUBMI
I. MWF Financial & Mortgage Center, Inc.	
(Enter name of corporation; must include "INCORPORATED," "Inc.," "Co.," "Corp." "Inc." "Co." or "Corp.")	COMPANY." "CORPORATION," COMPANY." "CORPORATION," COMPANY." "CORPORATION," COMPANY." "CORPORATION," COMPANY." "CORPORATION,"
(If name unavailable in Florida, enter alternate corporate name ado	pted for the purpose of transacting business in Florida)
2. Illinois 3, 36	-4406166
(State or country under the law of which it is incorporated)	(FEI number, if applicable)
4. 12/29/2000 S. pe	rpetual .
· · · · · · · · · · · · · · · · · · ·	Duration: Year corp. will cease to exist or "perpetual")
6, upon qualification	
(Date first transacted business in Florida. If corporation has not tra (SEE SECTIONS 607.1501, 60	
7 11 E. Wilson St., Batavia, IL 60510	
(Principal office address	;)
11 E. Wilson St., Batavia, IL 60510	
(Current mailing address	5}
g. Wholesale Mortgage Lender/Broker	
(Purposets) of corporation authorized in home state or coun	try to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.	O. Box or Mail Drop Box NOT acceptable)
Name: NRAi Services, Inc.	<u>_</u>
Office Address: 2731 Executive Park Drive, Suite 4	
_	
Weston (City)	, Florida 33331 (Zin code)
(Cny)	(7a) code)
10. Registered agent's acceptance: Having been numed as registered agent and to accept service designated in this application. I hereby accept the appointment further agree to comply with the provisions of all statutes related and I am familiar with and accept the obligations of my positions.	n as registered agent and agree to act in this capacity. I tive to the proper and complete performance of my duties,
NRAI Services, Inc.	
By: / (/	
(Registered agent's signature)	
Michael Mirrione, Asst. Secy. 11. Attached is a certificate of existence duly authenticated, no the Department of State, by the Secretary of State or other office.	

H060000571983

A. DIRECTORS
Chairman: Michael Fehrenbacher
Address: 11 E. Wilson St., Batavia, IL 60510
Vice Chairman:
Address:
Director
Address:
Director
Address:
B. OFFICERS
President; Michael Fehrenbacher
Address: 11 E. Wilson St., Batavia, IL 60510
vice President:
Address:
Secretary: Michael Fehrenbacher
Address: 11 E. Wilson St., Batavia, IL 60510
Freasurer,
Address:
NOTE: If necessary, you may attach an addendum to the application fisting additional officers and/or directors.
\ t -
(Signature of Director or Officer listed in number 12 of the application)
Michael Fehrenbacher, President
(Typed or printed name and capacity of person signing application)

H060000571983

File Number

6142-584-5



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do

In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of

the State of Illinois, this

21ST

day of

713

FEBRUARY

A.D.

2006

SECRETARY OF STATE