# F06000007247

(Requestor's Name)	30008145		
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL	11/03/0601013-		
(Business Entity Name)			
(Document Number)	Į A		
Certified Copies Certificates of Status	ALLA		
Special Instructions to Filing Officer:	Ţ		
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Office Use Only

### **COVER LETTER**

TO: New Filing Section Division of Corporations					
SUBJECT: America's Chorce Mortgage Services, Inc.					
(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:					
Michael Brooks					
(Name of Person)					
Mrchael Brooks (Name of Person)  America's Charce Mortgage Services, Inc. (Firm/Company)					
(Firm/Company)					
224 Leurntes Lane (Address)					
(Address)					
Lexington, SC 29072 (City/State and Zip code)					
(City/State and Zip code)					
For further information concerning this matter, please call:					
Michael Brooks at (903) 609-6872					
Michael Brooks at (903) 609-6872  (Name of Person) (Area Code & Daytime Telephone Number)					
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314					
Enclosed is a check for the following amount:					
\$70.00 Filing Fee \$78.75 Filing Fee & \$78.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy					



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

November 6, 2006

MICHAEL BROOKS AMERICA'S CHOICE MORTGAGE SERVICES, INC. 226 LEVENTIS LANE LEXINGTON, SC 29072

SUBJECT: AMERICA'S CHOICE MORTGAGE SERVICES, INC.

Ref. Number: W06000048612

We have received your document for AMERICA'S CHOICE MORTGAGE SERVICES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

An effective date <u>may</u> be added to the Articles of Incorporation <u>if a 2007 date is needed</u>, otherwise the date of receipt will be the file date. <u>A separate article must be added to the Articles of Incorporation for the effective date.</u>

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap Regulatory Specialist

Letter Number: 506A00065413

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## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

Ameri	ca's Chorce M	ortgage S	eniers, 7	nc.		
(Enter name of c "Inc.," "Co.," "C	orporation; must include "INCO orp," "Inc," "Co," or "Corp.")	ORPORĀTĒD," "CO	MPANY," "CORP	ORATION,"		
C . c	able in Florida, enter alternate c				s in Florida)	
	under the law of which it is ince	3	20-53831	er, if applicable)		
•			•			
(Date	9 - 2 u - 06 of incorporation)	5 (Dura	tion: Year corp. wi	U C      cease to exist or "	'perpetual")	
(		<b>\</b>			,	
	(Date first transa (SEE SECTIONS 607.	cted business in Florid 1501 & 607.1502, F.S		•	<del></del>	
726	Learnit's Lan.	- Lexin	gton, SC 2	9072		
	(Princ	ipal office address)				
276	Leurnhis La	nt mailing address)	ngton, SL	29072	<del></del>	
	(Сшт	nt mailing address)	J			
12-151	draft at Morte	zega Loui	دم			
				ate of Pioricia)		
Name and stree	t address of Florida registere	-			14 A A A A A A A A A A A A A A A A A A A	) )
Name:	Business Fili	195 Jugorp	parcinal		F. 3	
fice Address:	1203 farinors	Square Blood	, ste. 101		<b>3</b> 5. 1	Po work 20
	Tallahesser		7 Maria 2024	-291.0	1000	4 mg 2 mg 7 mg
	(City)		(Zip code	3)	-	
Pegistered a	gent's acceptance:					9. 3
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Mary & Spalinger: Asst. Sec. of Business filings Incorporated (Registered agents 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 business addresses of officers and/or directors:
A. DIRECTORS
Chairman: Michael Brooks
Address: 226 Leventrs Lane
Letington, SC 29072
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: Mi-chael Brooks
President: 777 Constant Consta
Address: 226 Leventis Lane Lexington, SC 29072
Letington, SC 29012
Vice President:
Address:
Secretary:
Address:
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. 2 1 - 2
(Signature of Director or Officer listed in number 12 of the application)
(Typed or printed name and capacity of person signing application)
/ AI - I

## The State of South Carolina





Office of Secretary of State Mark Hammond

## **Certificate of Existence**

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

AMERICA'S CHOICE MORTGAGE SERVICES, INC.,

a corporation duly organized under the laws of the State of South Carolina on September 20th, 2006, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the Corporation that it is subject to being dissolved by administrative action pursuant to section 33-14-210 of the South Carolina Code, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 23rd day of October, 2006.

Mark Hammond, Secretary of State