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TALLAHASSEE, FLORIDA

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December 11, 2006

Florida Dept of State
New Filing Section
Div of Corp
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

To Whom It May Concern:

Please find enclosed our completed application by foreign corporation for authorization to transact business in Florida with the appropriate payment. If at all possible, I would like to ask to have our reply sent back in the enclosed return overnight envelope. We are trying to expedite our application with the Office of Financial Regulations before year end.

If you are unable to comply with my request, I would appreciate your efforts and please disregard and destroy our enclosed overnight slip. Thank you in advance for your immediate attention to our request.

Sincerely,

Margaret Miller,
Exec Admin.

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: FIRST RATE MORTGAGE CORP

(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:

DONNIE BENNINGFIELD

(Name of Person)

FIRST RATE MORTGAGE CORP

(Firm/Company)

10400 LINN STATION RD, STE 226

(Address)

LOUISVILLE, KY 40223

(City/State and Zip code)

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For further information concerning this matter, please call:

MARGARET MILLER

(Name of Person)

at (502) 412-7161

(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 & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, 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. FIRST RATE MORTGAGE CORP

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

First Rate Mortgage Loans Corp.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. KENTUCKY

(State or country under the law of which it is incorporated)

3. 61-1336818

(FEI number, if applicable)

4. 10/08/1998

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. Upon qualification

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 10400 LINN STATION RD STE 226, LOUISVILLE, KY 40223

(Principal office address)

10400 LINN STATION RD STE 226, LOUISVILLE, KY 40223

(Current mailing address)

8. Mortgage Broker

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

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

Name: EUNICE GALLETS

Office Address: 2825 SOUTHWEST 22ND AVE STE 105

DELRAY BEACH, Florida 33445

(City)

(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.

Eunice Gallets

(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.

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

A. DIRECTORS

Chairman: DONNIE BENNINGFIELD

Address: 10400 LINN STATION RD STE 226, LOUISVILLE, KY 40223

Vice Chairman: N/A

Address: _____

Director: N/A

Address: _____

Director: N/A

Address: _____

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B. OFFICERS

President: DONNIE BENNINGFIELD

Address: 10400 LINN STATION RD STE 226, LOUISVILLE, KY 40223

Vice President: N/A

Address: _____

Secretary: N/A

Address: _____

Treasurer: N/A

Address: _____

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

13. Donnie Benningfield
(Signature of Director or Officer listed in number 12 of the application)

14. DONNIE BENNINGFIELD, PRESIDENT

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

Commonwealth of Kentucky
Trey Grayson
Secretary of State

Certificate of Existence

I, Trey Grayson, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

FIRST RATE MORTGAGE CORPORATION

is a corporation duly incorporated and existing under KRS Chapter 271B, whose date of incorporation is October 8, 1998 and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that articles of dissolution have not been filed; and that the most recent annual report required by KRS 271B.16-220 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 11th day of December, 2006.

Certificate Number: 40647

Jurisdiction: FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Visit <http://apps.sos.ky.gov/business/obdb/certvalidate.aspx> to validate the authenticity of this certificate.



Tn6z
Trey Grayson
Secretary of State
Commonwealth of Kentucky
40647/0463173

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