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Florida Department of State
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To: Division of Corporations
Fax Number : (850)205-0381

From: Account Name : US CORPWORKS INC.
Account Number : I2007D000066
Phone : (303)393-8800
Fax Number : (303)393-8900

FOREIGN PROFIT/NONPROFIT CORPORATION

National Mortgage Lending Group, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	04
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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. National Mortgage Lending Group, Inc.

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

NMLG Mortgage, Inc.

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

2. Georgia 3. 20-8914039
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 4/30/2007 5. perpetual
(Date of incorporation) (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. 3070 Windward Plaza, Suite F184, Alpharetta, GA 30005

(Principal office address)

3070 Windward Plaza, Suite F184, Alpharetta, GA 30005

(Current mailing address)

8. Transaction of lawful mortgage broker functions and to engage in any lawful act or activity for which corporations may be organized.
(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: NRAI Services, Inc.

Office Address: 2731 Executive Park Dr., Ste 4

Weston, Florida 33331
(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.

NRAI Services, Inc.



(Registered agent's signature) Michael Mirrone, Asst. Secretary

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: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Stephanie A. Sgro

Address: 3070 Windward Plaza, Suite F184, Alpharetta, GA 30005

Director: _____

Address: _____

B. OFFICERS

President: Stephanie A. Sgro

Address: 3070 Windward Plaza, Suite F184, Alpharetta, GA 30005

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. Stephanie A. Sgro
(Signature of Director or Officer listed in number 12 of the application)14. Stephanie A. Sgro, President
(Typed or printed name and capacity of person signing application)

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STATE OF GEORGIA**Secretary of State**

Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**CERTIFICATE
OF
EXISTENCE**

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

NATIONAL MORTGAGE LENDING GROUP, INC.**Domestic Profit Corporation**

was formed or was authorized to transact business on 04/30/2007 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 30th day of May, 2007

Karen C Handel
Secretary of State

Certification Number: 1408988-1 Reference: dw
Verify this certificate online at <http://corp.sos.state.ga.us/corp/soakb/verify.asp>

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