M02000000469

ACCOUNT NO. : 0721000000	32
REFERENCE : 408908	5142120
AUTHORIZATION: Patri	cia Pigita
COST LIMIT : \$ 125.00	<i>00</i>
ORDER DATE : February 21, 2002	
ORDER TIME : 9:29 AM	•
ORDER NO. : 408908-020	2000049907825
CUSTOMER NO: 5142120	at.
CUSTOMER: Ms. Lisa Bartlett-macx2401-06t Wells Fargo Home Mortgage, Inc 1 Home Campus	
Des Moines, IA 50328-0001	
<u>FOREIGN FILINGS</u>	02 DIVISI
NAME: DELUCA-REALEN MORTGAGE, LLC	RECEIVED 02 FEB 22 M IO: 33 DIVISION OF CORPORATION
XXXX_ QUALIFICATION (TYPE: LL) _	DRATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING	g: PAC
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	FIL FEB 22 CRETARY LAHASSI

CONTACT PERSON: Susie Knight -- EXT# 1156

EXAMINER:

APPROVED

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	(Name of foreign	n lin	nited liability company)	
Delawai (Jurisdic	re tion under the law of which foreign limited liability company is organized)	3.	(FEI number, if applicable)	
. <u>2/5/0</u> 2	(Date of Organization)	5.	perpetual (Duration: Year limited liability company will cease to exist or "perpetual")	
upon a	approval (Date first transacted business in Florida. (S	ee s	ections 608.501, 608.502, and 817.155, F.S.)	
. MAC X	2401-049, 1 Home Campus		<u> </u>	
Des Mo	oines, IA 50328-0001 (Street addre	ss o	f principal office)	
. If limi	ted liability company is a manager-manage	ed c	ompany, check here	
	ame and usual business addresses of the ma		ging members or managers are as follows:	02 FEB
Wells	s Fargo Ventures, LLC, MAC X2401-06T,	I H		22
			7 5 7 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	M :: 3
				ص ص
			lays old, duly authenticated by the official having custody of rec copy is not acceptable. If the certificate is in a foreign language,	
the juri	tion of the certificate under oath of the translator must			
the juri translat	• • •	bes	submitted.)	
the juri translat	tion of the certificate under oath of the translator must	bes	submitted.)	

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

Dollar Darler							
DeLuca-Realen	Mortgage, LLC		 	<u> = </u>			, , , ,
2. The name a	nd the Florida street address	of the registered	l agent and office	e are:			
	Corpor	ation Se <u>rv</u> ice C	ompany				
		(Name)					
	3	201 Hays Street		_			
		dress (P.O. Box NO					* .
	Tallahassee	FI.	32301				
	(City/State/Zip)		<u> </u>			_ *.*
liability compan registered agent statutes relating	med as registered agent and my at the place designated in the and agree to act in this cap to the proper and complete ations of my position as regingled.	this certificate, I acity. I further a performance of n	hereby accept the gree to comply w ny duties, and I a	e appointment of ith the provision ith familiar with	as SER ons of all ond	02 FEB 22 AM 11: 35	APPROVER AND FILED

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DELUCA-REALEN MORTGAGE, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF FEBRUARY, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DELUCA-REALEN MORTGAGE, LLC" WAS FORMED ON THE FIFTH DAY OF FEBRUARY, A.D. 2002.



Darriet Smith Windson Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1625407

DATE: 02-21-02

3488240 8300

020115573