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DIVISION OF CORFORATION



ACCOUNT NO. : 072100000032

REFERENCE :

522253

AUTHORIZATION :

COST LIMIT :

ORDER DATE: March 25, 2004

ORDER TIME : 9:27 AM

ORDER NO. : 522253-005

CUSTOMER NO: 5142120

CUSTOMER: Angie Sizemore

Wells Fargo Home Mortgage, Inc

1 Home Campus

Des Moines, IA 50328-0001

FOREIGN FILINGS

NAME: SUNSOUTH MORTGAGE, LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

___ CERTIFIED COPY

PLAIN STAMPED COPY

____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea -- EXT# 2914

EXAMINER:

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

IN COMPLIANCE WITH SECTION 608,503, FLORIDA STAT LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN	
1. Sunsouth Mortgage, LLC	五 2
(Name of forei	gn limited liability company)
2. Delaware	3. TBD
(Jurisdiction under the law of which foreign limited liability company is organized)	ty (FEI number, if applicable)
4. 3/3/04 (Date of Organization)	5. perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
6. TBD UPON QUALIFICATION (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)
7. MAC X2401-049 One Home Campus	
Des Moines, IA 50328-0001 (Street addi	ress of principal office)
8. If limited liability company is a manager-manager	<u> </u>
9. The name and usual business addresses of the m	nanaging members or managers are as follows:
Wells Fargo Ventures, LLC	
MAC X2401-05W	
One Home Campus	
Des Moines, IA 50328-0001	
	n 90 days old, duly authenticated by the official having custody of records in shotocopy is not acceptable. If the certificate is in a foreign language, a st be submitted.)
11. Nature of business or purposes to be conducted	d or promoted in Florida:
To provide residential mortgage ler	ding
- Kuden F	Saky
(In accordance with section 608.408(3	authorized representative of a member. 3), F.S., the execution of this document constitutes perjury that the facts stated herein are true.)
Karolyn Baker, Assist	
Typed or prin	ted 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.

	e Limited Liability Comp	oany is:			
Sunsouth Mort	gage, LLC	<u> </u>	<u> </u>	·	
2. The name and	the Florida street address	of the registere	d agent and office	are:	
	Corporat	ion Service	Company		
		(Name)			
		01 Hays Str			
	Florida street ado	dress (P.O. Box N	<u>)T</u> acceptable)		
	Tallahassee	FL	32301	<u></u>	• • • • • • • • • • • • • • • • • •
	((City/State/Zip)			
liability company of registered agent an statutes relating to	ed as registered agent and at the place designated in ad agree to act in this cap the proper and complete ons of my position as regi	this certificate, acity. I further performance of	I hereby accept the agree to comply w my duties, and I a	e appointment as ith the provisions on m familiar with an	of all

\$ 100.00 Filing Fee for Application

\$ 30.00

\$ 5.00

\$ 25.00 Designation of Registered Agent Certified Copy (optional)

Certificate of Status (optional)

(Signature)

PAGE 1

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SUNSOUTH 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-FIFTH DAY OF MARCH, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SUNSOUTH MORTGAGE, LLC" WAS FORMED ON THE THIRD DAY OF MARCH, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.



Warriet Smith Hindson
Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3012511

DATE: 03-25-04

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