

M04 000003725

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

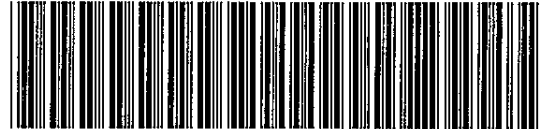
(Business Entity Name)

(Document Number)

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04 SEP 10 AM 8:44
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TALLAHASSEE, FLORIDA

BRK
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04 SEP -8 AM 10:43
STATE
CORPORATIONS
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032
REFERENCE : 876358
AUTHORIZATION :
COST LIMIT : \$ 125.00

Patricia Pappas
5142120

04 SEP 10 AM 8:44
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : September 7, 2004
ORDER TIME : 9:33 AM
ORDER NO. : 876358-005
CUSTOMER NO: 5142120
CUSTOMER: Angie Sizemore
Wells Fargo Home Mortgage
1 Home Campus
Des Moines, IA 50328-0001

FOREIGN FILINGS

NAME: SUMMIT NATIONAL MORTGAGE, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea -- EXT# 2914

EXAMINER: _____



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

FILED
04 SEP 10 AM 8:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

September 8, 2004

SARA LEA
CSC
TALLAHASSEE, FL

SUBJECT: SUMMIT NATIONAL MORTGAGE, LLC
Ref. Number: W04000033671

We have received your document for SUMMIT NATIONAL MORTGAGE, LLC and the authorization to debit your account in the amount of \$125.00. However, the document has not been filed and is being returned for the following:

In addition to the application, you must submit a CERTIFICATE OF GOOD STANDING from the Secretary of State of Delaware.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr
Document Specialist

Letter Number: 404A00053886

Resubmit

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04 SEP 10 AM 10:40
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
04 SEP 10 AM 8:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

- 1. Summit National Mortgage, LLC
(Name of Foreign Limited Liability Company)
- 2. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)
- 3. applied for
(FEI number, if applicable)
- 4. 9/1/04
(Date of Organization)
- 5. perpetual
(Duration: Year limited liability company will cease to exist or "perpetual")
- 6. Upon Qualification
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
- 7. MAC # X2401-049 One Home Campus
Des Moines, Ioa 50328-0001
(Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here

9. The name and usual business addresses of the managing members or managers are as follows:

Wells Fargo Ventures, LLC
MAC # X2401-05W One Home Campus
Des Moines, Iowa 50328-0001

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: To provide residential mortgage lending

Karolyn Baker
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
Karolyn Baker, Asst. Sec of the Member, Wells Fargo Ventures, LLC
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.

1. The name of the Limited Liability Company is:

Summit National Mortgage, LLC

2. The name and the Florida street address of the registered agent and office are:

Corporation Service Company

(Name)

1201 Hays Street

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Tallahassee

FL 32301

City/State/Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Corporation Service Company

By:

Laura G. Mearns

(Signature)

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

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SUMMIT NATIONAL 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 NINTH DAY OF SEPTEMBER, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SUMMIT NATIONAL MORTGAGE, LLC" WAS FORMED ON THE FIRST DAY OF SEPTEMBER, A.D. 2004.

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



3830608 8300

040653335

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3340119

DATE: 09-09-04