

BOY000000254

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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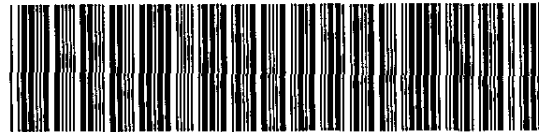
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
04 JUN 17 AM 10:48
STATE
DIVISION OF
TALLAHASSEE, FLORIDA

BK

RECEIVED
04 JUN 17 AM 11:17
STATE
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 713456 4344517

AUTHORIZATION : *Patricia Piro*

COST LIMIT : ~~\$ 909.83~~

FILED
04 JUN 17 AM 11:17
TALLAHASSEE, FLORIDA

ORDER DATE : June 3, 2004

ORDER TIME : 9:36 AM

210.00

ORDER NO. : 713456-200

CUSTOMER NO: 4344517

CUSTOMER: Kathy Snyder
Centex Corporation
Po Box 19000

Dallas, TX 75219-9000

FOREIGN FILINGS

NAME: AMERICAN MODULAR FINANCIAL, LP

XXXX QUALIFICATION (TYPE: LP)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman -- EXT# 2908

EXAMINER: _____

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

FILED
04 JUN 17 AM 11:17
TALLAHASSEE, FLORIDA

1. American Modular Financial, LP
(Name of limited partnership as it is in the home state)
2. _____
(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida;
must contain the word "LIMITED" or "LTD.")
3. Washington 4. April 23, 2004
(State of Formation) (Date of Formation)
5. Corporation Service Company
(Name of Registered Agent for Service of Process)
6. 1201 Hays Street
(Street Address of Registered Office)
- Tallahassee, Florida 32301
(City) (Zip Code)
7. Acceptance by the Registered Agent for Service of Process:
Corporation Service Company
By: Ann R. Snelling
(Agent must sign on this line)
8. c/o Corporation Service Company
801 Capitol Way, Olympia, Washington 98501
(Address of registered office required in state of formation or, if not required, address of principal office.)
9. NAMES OF GENERAL PARTNERS STREET ADDRESS
- CTX Mortgage Ventures, LLC, 2728 N. Harwood, Dallas, TX 75201-1516
- MC1000002724
10. 2728 N. Harwood, Dallas, TX 75201-1516
(Office where Names, Addresses and Contributions of Limited Partners are kept.)
11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.

CONTINUED

12. American Modular Financial, LP

P. O. Box 199000, Dallas, TX 75219-9000

(Mailing Address of Limited Partnership)

Under penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 9th day of June, 2004.

CTX Mortgage Ventures, LLC

By: Todd L. Salmans General Partner

STATE OF Texas

COUNTY OF Dallas

On this 9 day of June, 2004,

_____, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

Nancy Ann Arnold
(Notary Public Signature)

NANCY ANN ARNOLD
(Notary's Printed Name)

Seal

My Commission Expires: 9/4/2006



**AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED
PARTNERSHIP**

BEFORE ME the undersigned personally appeared CTX Mortgage Ventures, LLC (by Todd L. Salmans),
a general partner of American Modular Financial, LP, a (an) Washington
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

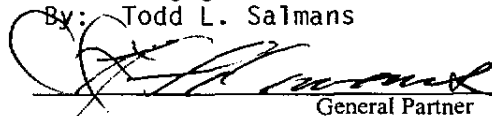
1. The amount of capital contributions of the limited partners is \$ 124,975.00.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of
transacting business in Florida is \$ 25,000.

*Under the penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and
that the facts stated herein are true and correct.*

Signed this 9th day of June, 2004.

CTX Mortgage Ventures, LLC

By: Todd L. Salmans


General Partner

STATE OF Texas

COUNTY OF Dallas

On this 9 day of June, 2004,

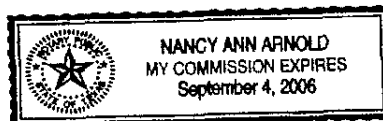
Todd L. Salmans, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____


(Notary Public Signature)

NANCY ANN ARNOLD
(Notary's Printed Name)



Seal

My Commission Expires:

9/4/2006