

B06000000293

(Requestor's Name)

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(Address)

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PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

B06-293
JR

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Wilshire Mortgage Services, LP

(Name of Foreign Limited Partnership or Limited Liability Limited Partnership)

The enclosed application, certificate of status and fees are submitted to register a foreign limited partnership or limited liability limited partnership to transact business in Florida. Please return all correspondence concerning this matter to:

Kendra Maurice

(Contact Person)

National City Mortgage Inc.

(Firm/Company)

3232 Newmark Drive

(Address)

Miamisburg, OH 45342

(City, State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Kendra Maurice

(Name of Contact Person)

at (937) 910-3935

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)
- \$1,008.75 Filing Fees and Certificate of Status
- \$1,052.50 Filing Fees and Certified Copy
- \$1,061.25 Filing Fee, Certified Copy, and Certificate of Status

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP
TO TRANSACT BUSINESS IN FLORIDA**

1. Wilshire Mortgage Services, LP

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.
or LLLP.

(If name unavailable, name under which the limited partnership or limited liability limited partnership
proposes to register to transact business in Florida; must contain acceptable suffix.)

2. Ohio

(State or Country of Formation)

3. _____

(Date of Formation)

4. CT Corporation System

(Name of Registered Agent for Service of Process)

5. 1200 South Pine Island Rd.

(Florida street address for Registered Agent)

Plantation, FL 33324

6. *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.*


Signature of Registered Agent

7. 4414 Del Prado Blvd., Suite A

(Principal office address)

Cape Coral, FL 33904

8. If limited partnership is a limited liability limited partnership, check box

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9. 3232 Newmark Drive, c/o National City Mortgage Inc.
(Mailing address)

Miamisburg, OH 45342

10. Name, principal office address, and mailing address of each general partner:

National City Mortgage Inc.
(Name)

FOS-2341

(Name)

(Name)

(Name)

3232 Newmark Drive
(Street Address)

Miamisburg, OH 45342

Same
(Mailing Address)

(Street Address)

(Mailing Address)

(Street Address)

(Mailing Address)

(Street Address)

(Mailing Address)

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MILLAN ASSOCIATES, FLORIDA

_____	_____
(Name)	(Street Address)
_____	_____
	(Mailing Address)
_____	_____
(Name)	(Street Address)
_____	_____
	(Mailing Address)

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 TALLAHASSEE, FLORIDA

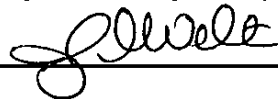
11. Effective date, if other than the date of filing: _____

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 14th day of July, 2006.

Signature of a general partner:



Filing Fees:	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

**United States of America
State of Ohio
Office of the Secretary of State**

I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show WILSHIRE MORTGAGE SERVICES, LP, an Ohio Limited Partnership, Registration Number 1635123, filed on July 13, 2006, is currently in FULL FORCE AND EFFECT upon the records of this office.



*Witness my hand and the seal of the
Secretary of State at Columbus, Ohio
this 18th day of July, A.D. 2006*

J. Kenneth Blackwell

Ohio Secretary of State

Validation Number: V2006199JE49F2

200619501272

DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
07/14/2006	200619501272	LIMITED PARTNERSHIP (CLP)	125.00	100.00	.00	.00	.00

Receipt

This is not a bill. Please do not remit payment.

CT CORPORATION SYSTEM
ATTN: TIMOTHY ROBERSON
17 S. HIGH ST., SUITE 1100
COLUMBUS, OH 43215

**STATE OF OHIO
CERTIFICATE**

Ohio Secretary of State, J. Kenneth Blackwell

1635123

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

WILSHIRE MORTGAGE SERVICES, LP

and, that said business records show the filing and recording of:

Document(s):

LIMITED PARTNERSHIP

Document No(s):

200619501272



United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the
Secretary of State at Columbus, Ohio
this 13th day of July, A.D. 2006.

J. Kenneth Blackwell
Ohio Secretary of State