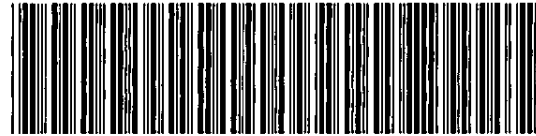


B12000000248



400240652744

10/25/12--01002--025 **1000.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

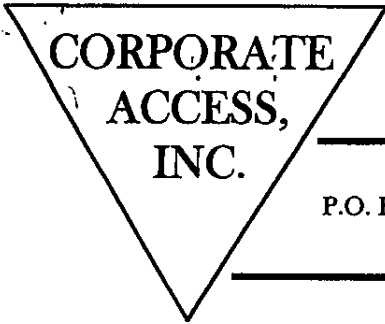
Office Use Only
B. KOYR

OCT 25 2012

EXAMINER

RECEIVED
DEPARTMENT OF STATE
12 OCT 25 AM 11:45

FILED
12 OCT 25 AM 10:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



"When you need ACCESS to the world"

236 East 6th Avenue . Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK IN

PICK UP: 10-24-12

FILED
12 OCT 25 AM 10:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- CERTIFIED COPY _____
- PHOTOCOPY _____
- CUS _____
- FILING LP

1. Reo Properties Two LP
(CORPORATE NAME AND DOCUMENT #)
2. _____
(CORPORATE NAME AND DOCUMENT #)
3. _____
(CORPORATE NAME AND DOCUMENT #)
4. _____
(CORPORATE NAME AND DOCUMENT #)
5. _____
(CORPORATE NAME AND DOCUMENT #)
6. _____
(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS: Shummer @ Pacific Companies,
Com

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

FILED
12 OCT 25 AM 10:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. REO PROPERTIES TWO 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.

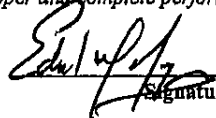
2. CALIFORNIA State or Country of Formation 3. 9/11/2009 Date of Formation

4. Federal Employer Identification Number: 27-1001266

5. Name of Registered Agent for Service of Process and Florida Street Address:

PARACORP INCORPORATED
236 EAST 6TH AVE
TALLAHASSEE, FL 32303

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.

 Edward W. Noyes, Asst. Sec.
Signature of Registered Agent

7. Principal Office:
1775 HANCOCK ST STE 200
SAN DIEGO, CA 92110

8. Mailing Address:
SAME

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

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

Name of General Partner: DEEPAK ISRANI Name of General Partner: _____
Street Address: 1775 HANCOCK ST 200 Street Address: _____
SAN DIEGO, CA 92110
Mailing Address: SAME Mailing Address: _____

Name of General Partner: _____ Name of General Partner: _____
Street Address: _____ Street Address: _____
Mailing Address: _____ Mailing Address: _____

Name of General Partner: _____ Name of General Partner: _____

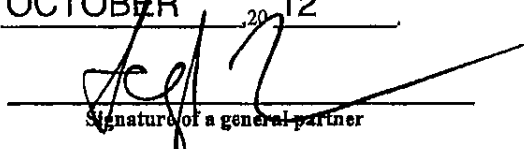
Street Address: _____ Street Address: _____

Mailing Address: _____ Mailing Address: _____

11. Effective date, if other than the date of filing: 10/16/2012
(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 16 day of OCTOBER, 2012



Signature of a general partner

The individual signing this document affirm that the facts stated herein are true and the individual is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

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

**State of California
Secretary of State**

CERTIFICATE OF STATUS

ENTITY NAME: REO PROPERTIES TWO LP

FILE NUMBER: 200925800003
FORMATION DATE: 09/11/2009
TYPE: DOMESTIC LIMITED PARTNERSHIP
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of October 16, 2012.

Debra Bowen

DEBRA BOWEN
Secretary of State

HSD