614000000141

(Re	equestor's Name)			
(Address)				
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
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(Bu	siness Entity Nar	me)		
(Document Number) .				
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B. BOSTICK JUN 1 9 2014

EXAMINER

1014-373



ACCOUNT NO. : I2000000195 REFERENCE : 166416 4339971 AUTHORIZATION : COST LIMIT : \$ 1000 ORDER DATE: June 5, 2014 ORDER TIME : 3:55 PM ORDER NO. : 166416-010 CUSTOMER NO: 4339971 FOREIGN FILINGS NAME: MORTGAGE CONNECT LP XXXX QUALIFICATION (TYPE: LP) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY PLAIN STAMPED COPY _ CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Emily Gray -- EXT# 62925

COVER LETTER

TO: Registration Sect Division of Corpo				
SUBJECT: Mortgage	Connect LP			
Name	of Foreign Limited Partn	ership or Limited Liability	Limited Partnership	
The enclosed application, partnership to transact bus Please return all correspond	iness in Florida.		a foreign limited partnership or	r limited liability limited
· · · · · · · · · · · · · · · · · · ·	Jarrod J. Duffy Contact Person			
				,
Cla	rk Hill Thorp Reed Firm/Company			
		4 4 () PP (
One Oxford Ce	ntre, 301 Grant St Address	., 14th Floor		
Pitts	sburgh, PA 15219			
Cit	y, State and Zip Code			
jduffy@c E-mail address: (to be us	clarkhillthorpreed.c	om I notification)		
For further information co	ncerning this matter, pleas	e call:		
Jarrod J. I			04-2560 me Telephone Number	
Enclosed is a check for the	e 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 Cir Tallahassee, FL 32301	rcle	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

🔒 Mortgage Conn	ect LP			
(Name of Lim Acceptable Limited Par	ited Partnership or Limited Liabil tnership suffixes: Limited Partnersh bility Limited Partnership suffixes: I	ip, Limited, L.P., LP, or Ltd.	,	
•	-	GAGE CONNECT SERVI		
If name unavailable, r	ame under which the limited partner business in Florida	ship or limited liability limited a; must contain acceptable suffi		ansact
₂ Pennsylvania		3.9/6/07	1	
	or Country of Formation	J Date	of Formation	
4. Federal Employer I	dentification Number: 26-16718	48		
	Agent for Service of Process and I			
Corporation Serv	ice Company			
1201 Hays Street				
Tallahassee, FL	32301			
of all statutes relativ	appointment as registered agent and be to the proper and complete performered agent. Corporation Service By: Signature	nance of my duties, and I am fa	miliar with and accept the obligation	visions 1s of
			Harry B. Davis	
7. Principal Office:		8. Mailing Address: Asst. Vice President		
260 Airside Drive		260 Airside Drive		-
Moon Township,	PA 15108	Moon Township, PA 15108		و ۰۰۰ مي هدر
9 If limited partners	hip is a limited liability limited part	tnership check box	.;	ئى ئى مەن رىما
-			·	•
to. Name, principal o	ffice address, and mailing address	ot each general partner:	CILL THAT I	.
Name of General P	artner: MC GP Services, In	C. Name of General Part	ner: 14-6400	
Street Address: 2	60 Airside Drive	Street Address:		
<u> </u>	Moon Township, PA 15108			
Mailing Address:		Mailing Address:		
Name of General P	artner:	Name of General Part	iner:	
Street Address:		Street Address:		
		Mailing Address:		

Name of General Partner:	1 of 2 Name of General Partner:
Street Address:	Street Address:
Mailing Address:	Mailing Address:
11. Effective date, if other than the date of filing:	e this document is filed by the Florida Department of State.)
12. Attached is a certificate of existence duly authenticated, not more Florida Department of State, by the Secretary of State or other officia the law of which it is organized.	I having custody of the entity's records in the jurisdiction under
The individual signing this document affirm that the facts stated here submitted in a document to the Department of State constitutes athird	degree felony as provided for in s.817.155, F.S. .00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Page 2 of 2

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COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

JUNE 13, 2014

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

Mortgage Connect LP

is duly registered as a Pennsylvania Limited Partnership under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT, This Subsistence Certificate shall not imply that all fees, taxes, and penalties owed to the Commonwealth of Pennsylvania are paid.

OF THE COATHON WEALTH

IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

Certification Number: 11917030-1



June 18, 2014

CSC EMILY GRAY

SUBJECT: MORTGAGE CONNECT SERVICES LP

Ref. Number: W14000037931

We have received your document for MORTGAGE CONNECT SERVICES LP and your check(s) totaling \$1000.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

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) 245-6051.

Tammy Hampton
Regulatory Specialist III

Letter Number: 814A00013183





June 18, 2014

CSC EMILY GRAY RESUBMIT

Please give original submission date as file date.

SUBJECT: MORTGAGE CONNECT OF FLORIDA LP

Ref. Number: W14000037931

We have received your document for MORTGAGE CONNECT OF FLORIDA LP and your check(s) totaling \$1000.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is distinguishable on our records. However, the name is similar to a name already on file with this office. Therefore, the use of this name may result in future complications. The name of the existing entity is: MORTGAGE CONNECT LLC, document number L03000004596.

You may 1.) resubmit the document under the current name; or 2.) choose to file under another name. If you choose to file under another name, please make the appropriate correction throughout the document(s).

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

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) 245-6051.

Tammy Hampton Regulatory Specialist III

Letter Number: 814A00013183