F0000000528

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section Division of Corporations	
SUBJECT: LAKE MARY MORTGAGE INC.	
(Name of corporation - must include suffix)	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.	-
Please return all correspondence concerning this matter to the following:	
D. JOHN VAUSE (Name of Person)	
(Name of Person) LAKE MARY MORTGAGE INC. FISH OF SINCE STATE OF SINCE S	-
(Firm/Company)	
3801 W. LAKE MARY BLUD, SUITE 19-41	
(Address)	
LAKE MARY FL 32746	
(City/State/Zip) 300031111930 -01/26/0001060013 *****78.75 *****78.75	
Should you need to call someone concerning this matter, please call:	
D. JOHN VALLEZ at (407, 797-4424	
(Name of Person) (Area Code & Daytime Telephone Number)	
STREET ADDRESS: MAILING ADDRESS:	
Qualification/Tax Lien SectionQualification/Tax Lien SectionDivision of CorporationsDivision of Corporations409 E. Gaines St.P.O. Box 6327Tallahassee, FL 32399Tallahassee, FL 32314	÷
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$78.75 Filing Fee & \$78.75 Filing Fee & Certificate of Status & Certificate Copy	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. -AKE MARY MORTGAGE INC. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.) State or country under the law of which it is incorporated)

(State or country under the law of which it is incorporated)

(FEI number, if applicable)

(Date of incorporation)

(Duration: Year corp. will cease to exist or "perpetual") Service of the control of Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) 3801 W. LAKE MARY BLUD. SUITE 119 (Current mailing address) MORTGAGE BROKERAGE BUSINESS (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: DAVID JOHN VALLEE TOMLINSON TERRACE
E MARY, Florida, 32746 10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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.

(Registered agent's signature)

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

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable) Chairman:	Constant of the second	<u></u> 1111
Address:	<u>2.</u>	
110		<u>.</u>
Vice Chairman: NA		
Address:	<u> </u>	
Dalla Inlandare		
Director: DAVID JOHN VALLEE		
Address: 807 TOMLINSON TERRACE	18	
LAKE MARY FC 32746	Service and Lightweek market	<u></u>
Director: NA	TAE 00	
Address:		<u> </u>
	26 ARY ASSI	:
B. OFFICERS (Street address only - P.O. Box NOT acceptable)	F.F.	
President: DAVID JOHN VACCES	<u> </u>	
Address: 807 TOMLINSON TERRACE	32 10A	·
LAKE MARY FL 32746		: ·
Vice President: NA		<u> </u>
Address:	<u> </u>	<u> </u>
Secretary: NA		and the second
Address:	-	
	. *	· · · · · · · · · · · · · · · · · · ·
Treasurer: CONNIE M. VALLEE		<u></u> -: ·
Address: 807 TOMLINSON TERRACE		
LAKE MARY FL 32746		
		<u></u> १० - १ काळे स् वेशेका स्
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or d (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application listing additional officers and/or d	m Valles	
DAVID JOHN VALLEE CONNIE	M, VALLE	٤ .
(Typed or printed name and capacity of person signing application)		

State of Delaware Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF INCORPORATION OF "LAKE MARY MORTGAGE INC.", FILED_IN THIS OFFICE ON THE FIFTH DAY OF JANUARY, A.D. 2000, AT 3 O'CLOCK P.M.

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE NEW CASTLE COUNTY RECORDER OF DEEDS.

FILED

00 JAN 26 PH 2: 32

SECRETARY OF STATE
SECRETARY OF STATE
SECRETARY OF STATE
AND AHASSEE, FLORIDA

3154637 8100 001006615



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/91-06-00

Edward J. Freel, Secretary of State

AUTHENTICATION:

DATE:

Wednesday, January 05, 2000 4:20 PM To: DivCorp Gateway

From:

302.324.0467

Page: 2 of 2

STATE of DELAWARE CERTIFICATE of INCORPORATION A STOCK CORPORATION

FIRST: The name of this Corporation is Lake Mary Mortgage Inc.

SECOND: Its Registered Office in the State of Delaware is to be located at 201 North DuPont Parkway in the City of New Castle, County of New Castle. The zip code is 19720. The name of the Registered Agent therein and in charge thereof upon whom process against this Corporation may be served, is Delaware Intercorp, Inc.

THIRD: The nature of the business and the objects and purposes proposed to be transacted, promoted and carried on, are to engage in any lawful act or activity for which corporations may be organized under the General Corporation Law of Delaware.

FOURTH: The amount of stock authorized is 3000 shares at no par value.

FIFTH: The name and mailing address of the incorporator are as follows:

Name:

Alan R. Coffey

Mailing Address;

201 North DuPont Parkway, New Castle, DE 19720

SIXTH: The directors of the corporation are not liable to either the corporation or its stockholders for monetary damages for a breach of fiduciary duties unless the breach involves: a) a director's duty of loyalty to the corporation or its stockholders; b) intentional misconduct or violation of law; c) a transaction from which the director derived an improper personal benefit; or d) liability for unlawful payments of dividends or unlawful stock purchases or redemption by the corporation.

SEVENTH: The powers of the incorporator are to terminate upon filing of this certificate with the Secretary of State. The initial director of this corporation shall be:

Name:

Mr. David John Vallee

Address:

3801 W. Lake Mary Blvd., Suite 119-41

Lake Mary, FL 32746-6159

I, The Undersigned, for the purpose of forming a corporation under the laws of the State of Delaware, do make, file and record this Certificate, and do certify that the facts herein stated are true, and I have accordingly hereunto set my hand this fifth day of January, AD 2000.

Incorporator: Alan R. Coffey

STATE OF DELAWARE SECRETARY OF STATE DIVISION OF CORPORATIONS FILED 03:00 PM 01/05/2000 001006615 - 3154637