

ACCOUNT NO. : 072100000032

REFERENCE :

602586 4386318

AUTHORIZATION \_

ORDER DATE: February 25, 2000

ORDER TIME : 11:41 AM

ORDER NO. : 602586-005

CUSTOMER NO: 4386318

600003150416--4

CUSTOMER: Ms. Glenda Daniel

Countrywide Home Loans, Inc.

Mail Stop: Ch-11

4500 Park Granada Boulevard

Calabasas, CA 91302

NAME:

COUNTRYWIDE CREDIT INDUSTRIES

INC

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Erika Carlson

## Division of Corporations 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: Should you need to call someone concerning this matter, please call: (Area Code & Daytime Telephone Number) STREET ADDRESS: MAILING ADDRESS: Qualification/Tax Lien Section Qualification/Tax Lien Section Division of Corporations Division of Corporations 409 E. Gaines St. P.O. Box 6327 Tallinassee FL 32399 Tallahassee, FL 32314 Enclosed is a check for the following amount: ☐ \$70.00 Filing Fee □ \$78.75 Filing Fee & □ \$78.75 Filing Fee & ■ \$87.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy

TRANSMITTAL LETTER

To:

Qualification/Tax Lien Section

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRA BUSINESS IN FLORIDA IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED T REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. (Name of emperation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abtreviations of like import in language as will clearly indicate that it is a corporation instead of a natural persent of partnership if not so contained in the name at present.) the law of which it is incorporated) (FEI number, if applicable) MWDANL business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155 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) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee Florida. 10. Registered agent's acceptance:

Having over 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.

Corporation Service tompany

(Registered agent's signature)

Bobbie Hall, Assistant Vice President

11. Attacmed 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.

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)	A COMMENT OF THE STATE OF THE S
Chairman David S. LOED	8 9 A
Address 4500 Park Granda	B P
Calabasas	0 3/4
Vice Chaman: Angelo R. Mozilo	0. 77
Address 4500 Park Granada	% ू
Calabasas, CA 91302	
Director Stanford L. Kurland	
Address: 4500 Park Granada	
Calabasas, CA 91302	
Director:	
Address:	
B. OFFICERS (Street address only - P.O. Box NOT acceptable)	
President See attached officers/directors rider	
Address: 4500 Park Granada	
Calabasas, CA 91302	
Vice President: MARK LOSON	
Address: 4500 Park branda	
Calasta sas , 1491302	
Assistant Susan E. Bow.	
16000 Dack Granden attell	-
Address: 4000 FWR CIMCAGO, CITY	
Trensing Thomas Keith McLaughlin	•
HEAD DANK GOODE do	· · · · · · · · · · · · · · · · · · ·
Address:	
NOTE: If necessary) you may attach an addendum to the application listing additional officers and/or director:	5.
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	)
14. ASSISTANT Secretary	
(Typed or printed name and capacity of person signing application)	

## State of Delaware Office of the Secretary of State

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "COUNTRYWIDE CREDIT INDUSTRIES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIFTH DAY OF FEBRUARY, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES

HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COUNTRYWIDE CREDIT INDUSTRIES, INC." WAS INCORPORATED ON THE SECOND DAY OF DECEMBER, A.D. 1986.

Edward J. Freel, Secretary of State

AUTHENTICATION:

0280388

001095655 .....

2109447 83-00

DATE:

02-25-00