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4.

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Missouri Mortgage Savings, 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:

Kimberly A. Grasso

(Name of Person)

Missouri Mortgage Savings, Inc.

(Firm/Company)

15400 South Outer Forty Road, Suite 108

(Address)

Chesterfield, MO 63017

(City/State and Zip code)

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-11/15/00-01004--017
*****78.75 *****78.75

For further information concerning this matter, please call:

Kimberly A. Grasso

(Name of Person)

at (636) 537-4202

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &
Certificate of Status

☒ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
Certified 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.*

1. MISSOURI MORTGAGE SAVINGS, 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.)

2. MISSOURI 3. 43-1713825
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 6/1/95 5. N/A
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. UPON QUALIFICATION

(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 15400 SOUTH OUTER FORTY, SUITE 108; CHESTERFIELD, MO. 63017
(Principal office address)
- 15400 SOUTH OUTER FORTY, SUITE 108; CHESTERFIELD, MO. 63017
(Current mailing address)

8. RESIDENTIAL MORTGAGES

(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: HUGO MESA

Office Address: 248 N.W. LEJUENE RD
MIAMI, Florida 33126
(City) (Zip code)

HUGO MESA
248 N.W. LEJUENE RD.
MIAMI, FL. 33126

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.

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TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: James M. Grasso
Address: 15400 South Outer Forty Road, Suite 108
Chesterfield, MO 63017

Vice Chairman: Kimberly A. Grasso
Address: 15400 South Outer Forty Road, Suite 108
Chesterfield, MO 63017

Director: _____
Address: _____

Director: _____
Address: _____

B. OFFICERS

President: James M. Grasso
Address: 15400 South Outer Forty Road, Suite 108
Chesterfield, MO 63017

Vice President: Kimberly A. Grasso
Address: 15400 South Outer Forty Road, Suite 108
Chesterfield, MO 63017

Secretary: Kimberly A. Grasso
Address: 15400 South Outer Forty Road, Suite 108

Treasurer: James M. Grasso
Address: 15400 South Outer Forty Road, Suite 108

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TALLAHASSEE, FLORIDA

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Kimberly A. Grasso
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Kimberly A. Grasso, Vice-President
(Typed or printed name and capacity of person signing application)

No. 00412148

STATE OF MISSOURI



Rebecca McDowell Cook
Secretary of State

CORPORATION DIVISION

CERTIFICATE OF CORPORATE GOOD STANDING

I, REBECCA McDOWELL COOK, Secretary of State of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

MISSOURI MORTGAGE SAVINGS, INC.

was incorporated under the laws of this State on the 1st day of JUNE, 1995, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 6th day of NOVEMBER, 2000.

Rebecca McDowell Cook
Secretary of State



FILED
NOV 14 2000
TALLAHASSEE, FLORIDA
SECRETARY OF STATE