# F01000005818

#### TRANSMITTAL LETTER

Registration Section

TO:

Division of Corporati	ons				
SUBJECT: The /	10rtgage (	Troup & 7	nuestm	ients B	, Inc
	(Maine of Corporat	HOH - Hust metade sattus)			
Dear Sir or Madam:					
The enclosed "Application by "Certificate of Existence", an to transact business in Florida	d check are submitted to	or Authorization to Transa o register the above refere	ct Business in nced foreign co	Florida", orporation	
Please return all corresponde	nce concerning this mat  B-2/15  (Name	ter to the following:  On  of Person)	10/2	465361 25/0101071 1878.75 ***	76 014 **78.75
				W0/-2499	22
The /1/8	ntqaqe	GROUP	, , , , , , , , , , , , , , , , , , , ,		tq ==
	(Firm/C	Company)	· · · · · ·	-	-
18945 St	ate Brid	ge Rd	Ste.	401	e in the second
	(Ac	ldress)	_		
Alphanet	to GA	アのロンユ te and Zip code)	<del></del>	<del></del>	
	/ (City/Stat	te and Zip code)			
For further information conc  (Name of Person)		e call:  O PG - P  ea Code & Daytime Telepl	(78 9 hone Number)		+1 + <b>2</b>
(2 · · · · · · · · · · · · · · · · · · ·	`			SS	
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 Enclosed is a check for the f	following amount:	MAILING ADDRES Registration Section Division of Corporate P.O. Box 6327 Tallahassee, FL 323	ions	1 NOV -8 ECRETARY	可 三 可 フ
\$70.00 Filing Fee (	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy		Filing Fee, cate of Status & ed Copy	ynth 1118



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

October 29, 2001

CRAIG S. BENSON 10945 STATE BRIDGE RD, STE 401 ALPHARETTA, GA 30022

SUBJECT: THE MORTGAGE GROUP & INVESTMENTS CO INC.

Ref. Number: W01000024922

We have received your document for THE MORTGAGE GROUP & INVESTMENTS CO INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please give the complate Florida address for the registered agent in number #9.,

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) 245-6097.

Michael Mays Document Specialist

Letter Number: 201A0005908

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## 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. The Mortgage Group & Investments (3, Inc (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or
(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.)
natural person of partnership it not so contained in the name at presently
-2. State or country under the law of which it is incorporated) (FEI number, if applicable)
-4. 1-1-94 5. Pepeta of [Duration: Year corp. will cease to exist or "perpetual"]
(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. 10945 State Bridge Rd Ste 401 Alphanetta, Go. (Principal office address)
Same (Principal office address)
(Current mailing address)
8. Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
(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: CRaig S Benson Office Address: 244 Callman Au
Office Address: 244 (allman Hu
Seagrove Brach, Florida 30245 (Zip code)
(City) (Zip code) $\odot$
RIDE 38
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 garee 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.
Nove/ XSenson
(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 business addresses of officers and/or directors:

A. DIRECTORS			-			-
Chairman:		· · · · · · · · · · · · · · · · · · ·				g,#%
Address:			<del></del>	<u> </u>		च्या ्र
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Vice Chairman:			-		,	·- · · ·
Address:						· · ·
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Director:			•	· · · · · · · · · · · · · · · · · · ·		# ± ··.
Address:						:.es
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Director		<u> </u>				. <u></u>
Director:		-		<u></u>		<u>.</u>
Address:				<u></u>	e contraction	<u></u>
B. OFFICERS  President: 2975  Address: 2975	Sector	Ben	5801 Di	2		
Cumming	64	<u> </u>	30041	T A T	9	τ
Vice President:	/	<del></del>		L A	<u> </u>	·
Address:				SS S		
				<u>,                                    </u>	<del>∞  </del>	
Secretary:		<del></del>	<u> </u>	75. 25. 27. 27.	<u>*</u> 0	<del>-</del>
Address:			<u> </u>	<del>N</del> OA H	38	·
			-: <del>-:</del>		<u>, , , , , , , , , , , , , , , , , , , </u>	: Tyeter T
Treasurer:		<del></del>	<del>,,, : - t</del> ,	<u></u>		·
NOTE: If necessary, you may atta	action addendum to the	application list	ing additional off	icers/and/or directo	ors.	· ***
13. May		D&G		Res		
(Signature of Chai	rman, Vice Chairman, o	r any officer li	sted in number 12	of the application	)	
14. Raig		000	- F	ees_	<del></del>	4 -y = 14 -z =
(Typed or	printed name and capaci	ity of person si	gning application	<b>i)</b>		

## **Secretary of State**

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 CONTROL NUMBER : K409536
DATE INC/AUTH/FILED: 04/11/1994
JURISDICTION : GEORGIA
PRINT DATE : 10/22/2001

FORM NUMBER : 211

THE MORTGAGE GROUP CRAIG S. BENSON, PRES. 10945 STATE BRIDGE RD. SUITE 401 ALPHARETTA, GA 30022

#### CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that as of the above print date

THE MORTGAGE GROUP & INVESTMENTS CO. INC.

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official code of Georgia Annotated

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date and has not filed articles of dissolution, certificate of cancellation of any other similar document with the Office of the Secretary of State

This certificate relates only to the legal existence of the above-named entity as of the print date above. It does not certify whether or notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This information is electronically transmitted, issued and certified in accordance with the Georgia Electronic Records and Signatures Act and Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



Cathy Cox Secretary of State