

FO2000000948

5.

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: INDIANA MORTGAGE NETWORK, 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:

JASON H. SPECTOR
(Name of Person)

INDIANA MORTGAGE NETWORK, INC
(Firm/Company)

8395 KEYSTONE CROSSING - 202
(Address)

INDIANAPOLIS, IN 46240
(City/State and Zip code)

FILED
FEB 22 PM 3:48
TALLAHASSEE, FLORIDA
OFFICE OF THE
CLERK OF THE
SUPREME COURT

mtu

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For further information concerning this matter, please call:

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-01/31/02--01014-012
*****87.50 *****87.50

JASON SPECTOR at (317) 466-0677
(Name of Person) (Area Code & Daytime Telephone Number)

W02-3280

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

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



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

February 5, 2002

JASON H. SPECTOR
8395 KEYSTONE CROSSING - 202
INDIANAPOLIS, IN 46240

SUBJECT: INDIANA MORTGAGE NETWORK, INC.
Ref. Number: W02000003280

We have received your document for INDIANA MORTGAGE NETWORK, INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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: 102A00006912

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02 FEB 22 PM 8:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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. INDIANA MORTGAGE NETWORK, 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. INDIANA 3. 52-2281951
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 12/99 5. _____
(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. 8395 KEYSTONE CROSSING-202, INDIANAPOLIS, IN 46240
(Principal office address)
8395 KEYSTONE CROSSING-202, INDIANAPOLIS, IN 46240
(Current mailing address)
8. DO BUSINESS AS AN INCORPORATED MORTGAGE BROKER
(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: STEPHEN D. MEARS
Office Address: 25220 PELICAN CRK CIR. #202
BONITA SPRINGS, Florida 34134
(City) (Zip code)

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: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: _____

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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TALLAHASSEE, FLORIDA

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

13. _____

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. _____

JASON SPECTOR, PRESIDENT

(Typed or printed name and capacity of person signing application)

**STATE OF INDIANA
OFFICE OF THE SECRETARY OF STATE
CERTIFICATE OF EXISTENCE**

To Whom These Presents Come, Greeting:

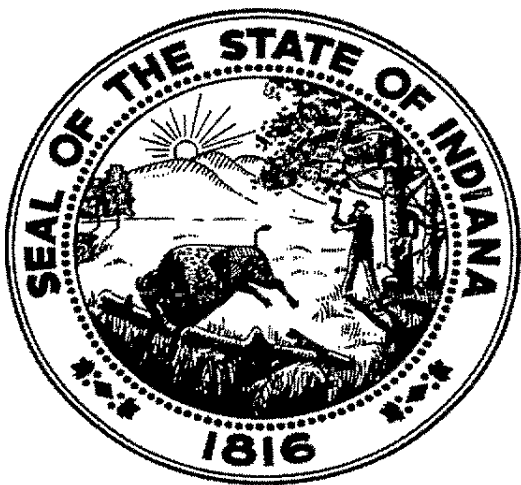
I, SUE ANNE GILROY, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

INDIANA MORTGAGE NETWORK, INC.

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on December 16, 1999, and was in existence or authorized to transact business in the State of Indiana on February 11, 2002.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand
and affixed the seal of the State of Indiana, at the
City of Indianapolis, this Twelfth Day of February, 2002.

Sue Anne Gilroy

SUE ANNE GILROY, Secretary of State

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