FIRST FEDERATED MORTGAGE 875 OLD ROSWELL ROAD SUITE G-300 ROSWELL, GA 30076

City/State/Zip

Phone #

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SECRETARIO OF STATE
TALLAHASSEE, FLORID

Office Use Only

Examiner's Initials

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1.			
•	(Corporation Name)	(Document #) 30005623033- -05/29/020101102 *****87.50 *****87	4 :5 '.50
۷.	(Corporation Name)	(Document #)	
3.	(Corporation Name)	(Document #) War - 1616	8
┿.	(Corporation Name)	(Document #)	* *
	□ Walk in □ Pick up time □ Mail out □ Will wait	Certified Copy Photocopy Certificate of Status	AL
Ī	NEW FILINGS	AMENDMENTS	
	Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger	
9	OTHER FILINGS	REGISTRATION/QUALIFICATION	
[Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other	

CR2E031(7/97)



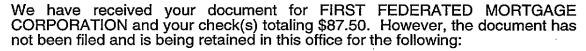
FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 4, 2002

H. CHRISTINE PETERS FIRST FEDERATED MORTGAGE CORP. 875 OLD ROSWELL RD G-300 ROSWERLL, GA 30076

SUBJECT: FIRST FEDERATED MORTGAGE CORPORATION

Ref. Number: W02000016168



The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

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) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 902A00036135

RESOLUTION OF BOARD OF DIRECTOR

(Please print or type)

I, the undersigned H.C. I ETERS , do hereby certify
(Name)
that this Resolution of the Board of Directors of FIRST FEDERATED MORIGAGE
Corp.
(Corporate Name)
a corporation duly organized and existing under the laws of the State of <u>CEORGIA</u> ,
was duly adopted on O6/10/02
Be it resolved, that FIRST FEDERATED MORTGAGE CORP.
(Corporate Name)
organized and existing in the State of <u>Seorgia</u> , hereby adopts the name
IRST FEDERATED HOME MORIGAGE CORP for use in Florida.
Dated: 06/10/02
IA.C. Velus President
Signature of either Chairman, Vice Chairman or any officer
H.C. PETERS PRES.
Type or print name

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

INHS19(1/00)

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1303, PLORIDA ST. REGISTER A FOREIGN CORPORATION TO TRANSACT B	IIRINESS IN THE STATE OF FLORIDA
1. FIRST FEDERATED MORIGA	GE CORPORATION FF -
(Name of corporation; must include the word "INCORPORATE	D", "COMPANY", "CORPORATION" or
words or abbreviations of like import in language as will clearly natural person or partnership if not so contained in the name at p	revent)
2. <u>GEORGIA</u> 3.	58-1951484 ≈≥ w
2. <u>State or country under the law of which it is incorporated</u> 3.	(FEI number, if applicable)
4 1991 5.	PERDETUAL
(Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
11-11 60111 -10-	
6. Upon QUACIFICATION (Date first transacted business in Florida. If corporation has not	transacted business in Florida insert "mon qualification")
(SEE SECTIONS 607.1501,	607.1502 and 817.155, F.S.)
1 875 OLD ROSWEIL RD S	STEG-300 ROSWEIL, Ga 30076
(Principal office addre	ess)
Same As	ABOUT
SAME AS (Current mailing addr	ess)
	•
8. MORTGAGE BROKER	SERVICES
(Purpose(s) of corporation authorized in home state or cou	untry 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: GARY L. PETERS	
, ,	
Office Address: 4035 SE 17th Li	<u>4 · </u>
000/0	Water 34171-57070
CC19CH (City)	, Florida <u>34471</u> - 56 20 (Zip code)
(Chy)	(Zip code)
10. Registered agent's acceptance:	
Having been named as registered agent and to accept service	
designated in this application, I hereby accept the appointm	
further agree to comply with the provisions of all statutes re duties, and I am familiar with and accept the obligations of	
ances, and I am juminar with the accept the obligations of	my position as registered agenc
4	
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(Parithred agent's six	WICO
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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	
Chaixman:	
Àddress:	
Vice Chairman:	NALU TALL
Address:	
	SSE E
Director:	FIG. 3 D
Address:	ORA 3:
	A
Director:	
Address:	
B. OFFICERS	
President: H.C. PETERS PRESIDENT	
Address: 7430 With BUD DR.	
GAINESVIllE, Ga 30806	
Vice President: Amy Gago	
Address: 896 EDEN AVE	
ATLANTA, Ga 30317	-
Secretary: SAME AS V.P Amy Gag.	<u></u>
Address:	
Treasurer:	
Address:	
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 ap	plication)
14. 1-1.C. PETERS PRESIDENT	
(Typed or printed name and capacity of person signing application)	

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: FIRST FEDERATED MORIGAGE CORP. (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 comporation to transact business in Florida.
Please return all correspondence concerning this matter to the following: II. CARSTINE ETERS
(Name of Person) \$\overline{\overlin
(Firm/Company) 875 OLD ROSWELL RD G-300 (Address) 7008WELL, GA 30076
(City/State and Zip code) For further information concerning this matter, please call:
(Name of Person) at (770) 993-4894 (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 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 & ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CONTROL NUMBER : K115939 DATE INC/AUTH/FILED: 08/16/1991 JURISDICTION : GEORGIA PRINT DATE : 05/24/2002

FORM NUMBER : 211

FIRST FEDERATED MORTGAGE CORP CHRIS PETERS 875 OLD ROSWELL ROAD SUITE G300 ROSWELL, GA 30076

CERTIFICATE OF EXISTENCE

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

the applicable filing gistration provisions is in compliance with of Title 14 of the Official Code of Georgia Annotated

Said entity was formed in the jurisdict transact business in Georgia on the abodissolution, certificate of cancellation Office of the Secretary of State was authorized to and has not filed articles of other similar document with the

This certificate relates only to the regal existence of the above-named entity as of the print date, above. It does not certify whether or not a 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.

transmitted, This information is issued and certified in electr 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.

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Secretary of State