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DIVISION OF CORPORATIONS

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: ADVOCATE MONTUACE GROUP, 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: PAUL Michael Kruesen
Advocate Montance Conout, Inc
16 South Cruent Street = Sufe 203 Britimen &
BACTIMORE, Md 21202 = 3
(City/State and Zip code)
(City/State and Zip code) (City/State and Zip code) For further information concerning this matter, please call:
PAUL M. Kriegen. at (443 572-6784) (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (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 Pio. 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 & Certificate of Status Certified Copy 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. ADVOCATE MORTGAGE GROUP, 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. MANYLAND 3 = 52-1992-632 (FEW)
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. Sept. 11, 1996 5 "Perpetuac"
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6 (IOUN QIVACIFICATION)
(Dute first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
16 South Calvert St. Site 203 [SALTIMORY. Md 2/202
''arabaBarinana araban araban alah bahari Barinana akan araban araban bahari bahari bahari bahari bahari bahar
16 South Calvert St. Site 203 BATIMONE, Md 21202.
(Current mailing address)
& MONTANGE Brokerage, Lending, and any other Legal Purpose.
(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)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: CT CORPORATION SYSTEM Office Address: 1200 South Pine Island Road
Office Address: 1200 SOUTH PINE ISLAND NOAD
PLANTATION Florida 33324
(City) —Florida 33324 (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 described in this positional state of the appointment of registered agent and agent to the constitute of t
(0. Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated corporation at the place
lesignated 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
ut ther agree to comply with the provisions of an statutes retaine to the proper and complete performance of my Luties, and I am familiar with and accept the obligations of my position as registered agent.

II. 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.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors: A. DIRECTORS Vice Chairman: Address: ____ Director: Director: _ **B. OFFICERS** Address: Vice President: _____ Address: _ Kruegen above. Sume Address: Sruger Address: _ an addendum to the application listing additional officers and/or directors. NOTE: If necessary, you may attack Chairman, Me Chairman, or any officer listed in number 12 of the application) PAUL M. KRUEGER (Typed or printed name and capacity of person signing application) Advocate Mortgage Group

STATE OF MARYLAND

Department of Assessments and Taxation

I, PAUL ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT ADVOCATE MORTGAGE GROUP, INC. IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS JANUARY 13, 2003.

Paul B. Anderson Charter Division DIVISION OF CORPORATIONS



301 West Preston Street, Baltimore, Maryland 21201
Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941
MRS (Maryland Relay Service) (800) 735-2258 TT/Voice
Fax (410) 333-7097

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