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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

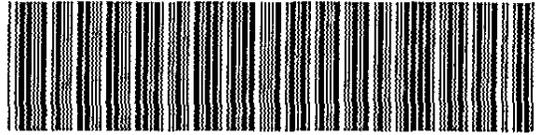
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TALLAHASSEE FLORIDA

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**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** HOMETOWN MORTGAGE AND FINANCIAL SERVICES I  
(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:

LISA C. CLARKE  
(Name of Person)

HOMETOWN MORTGAGE AND FINANCIAL SERVICES INC  
(Firm/Company)

6151 WILSON MILLS RD #305A  
(Address)

HIGHLAND HTS, OHIO 44143  
(City/State and Zip code)

For further information concerning this matter, please call:

LISA C. CLARKE at (440) 446-0166  
(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  
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

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. HOMETOWN MORTGAGE AND FINANCIAL SERVICES 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. OHIO 3. 341697555  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 1/3/92 5. 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. 6151 WILSON MILLS RD. #305A HIGHLAND HTS, OH 44143  
(Principal office address)

6151 WILSON MILLS RD. #305A HIGHLAND HTS, OH 44143  
(Current mailing address)

8. MORTGAGE BROKER BUSINESS  
(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 accepted)

Name: STEVE CLARKE

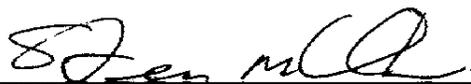
Office Address: 6620 SANDALWOOD LN

NAPLES, Florida 34109  
(City) (Zip code)

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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.

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

A. DIRECTORS

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

B. OFFICERS

President: Stephen M. Clarke c/o Hometown Mtg & Fin Svc I

Address: 6151 Wilson Mills Rd. #305A  
Highland Hts, Ohio 44143

Vice President: Lisa C. Clarke c/o Hometown Mtg & Fin Svc Inc

Address: 6151 Wilson Mills Rd. #305A  
Highland Hts, Ohio 44143

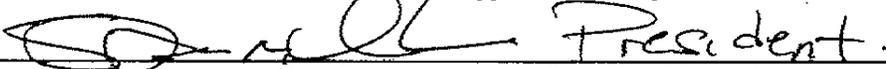
Secretary: Stephen M. Clarke c/o Hometown Mtg & Fin Svc Inc

Address: 6151 Wilson Mills Rd. #305A

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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

13.  President.

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

14. Stephen M. Clarke

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

**United States of America**  
**State of Ohio**  
**Office of the Secretary of State**

*I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show **HOMETOWN MORTGAGE AND FINANCIAL SERVICES, INC.**, an Ohio corporation, Charter No. 810484, having its principal location in Mayfield Hts., County of Cuyahoga, was incorporated on January 03, 1992 and is currently in **GOOD STANDING** upon the records of this office.*



*Witness my hand and the seal of the  
Secretary of State at Columbus, Ohio  
this 27th day of March, A.D. 2003*

*J. Kenneth Blackwell*

Ohio Secretary of State