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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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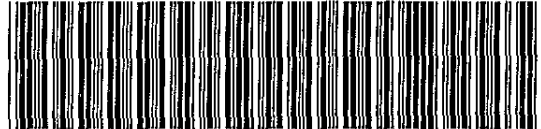
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7/13/03
[Signature]

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Manufactured Housing Mortgage Acceptance 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 corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Charles A. Partney
(Name of Person)
Manufactured Housing Mortgage Acceptance Corporation
(Firm/Company)
1041 Highland Circle, Ste. 59
(Address)
Mountain Home, AR 72653
(City/State and Zip code)

For further information concerning this matter, please call:

Charles Partney at (870) 508 2170 Ext. 109
(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

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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. Manufactured Housing Mortgage Acceptance Corporation
(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. Arkansas 3. 71-0836616
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. November 15, 1999 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. 1041 Highland Circle, Ste. 59 Mountain Home AR 72653
(Principal office address)
Same as above
(Current mailing address)
8. Mortgage Banking & other lawful activities
(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: Donna Pepper
Office Address: 129 Robin Road
Altamonte Springs, Florida 32701
(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.

Donna D. Pepper
(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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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Lisa Cimino

Address: 1041 Highland Circle, Ste. 59
Mountain Home AR 72653

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Lisa Cimino

Address: 1041 Highland Circle Ste 59
Mountain Home AR 72653

Vice President: Charles A. Partney

Address: 153 Kingsberry Drive
Mountain Home AR 72653

Secretary: Lisa Cimino

Address: 1041 Highland Circle Ste. 59, Mountain Home AR 726

Treasurer: Lisa Cimino

Address: 1041 Highland Circle Ste. 59 Mountain Home, AR 72653

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TALLAHASSEE, FLORIDA

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

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

14. Lisa Cimino, President
(Typed or printed name and capacity of person signing application)



**Arkansas Secretary of State
Charlie Daniels**

State Capitol Building ♦ Little Rock, Arkansas 72201-1094 ♦ 501-682-3409

Certificate of Good Standing

I, Charlie Daniels, Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show

**MANUFACTURED HOUSING MORTGAGE ACCEPTANCE
CORPORATION**

authorized to transact business in the State of Arkansas as a For Profit Corporation, filed Articles of Incorporation in this office November 15, 1999.

Our records reflect that said entity, having complied with all statutory requirements in the State of Arkansas, is qualified to transact business in this State.



**In Testimony Whereof, I have hereunto set my hand
and affixed my official Seal. Done at my office in the
City of Little Rock, this 1st day of July 2003.**

Charlie Daniels

Charlie Daniels
Secretary of State

Online Certificate Authorization Code: 73667f297bcfe4b

To verify the Authorization Code, visit www.sosweb.state.ar.us