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TRANSMITTAL LETTER

_	ation Section on of Corporations	
SUBJECT:	Sabre Mortgage Solutions, Inc.	
	(Name of corporation - must include suffix)	
Dear Sir or Ma	dam:	
"Certificate of	Application by Foreign Corporation for Authorization to Transact Business in Florida", Existence", and check are submitted to register the above referenced foreign corporation ness in Florida.	
Please return a	I correspondence concerning this matter to the following:	
Sabrina K	orb	
·	(Name of Person)	
Sabre Mo	tgage Solutions, Inc.	
075.0#	(Firm/Company)	
675 South	crest Parkway, Suite 110	
Ctaalchride		7
Stockblide	e, GA 30281 5 5 5 6	J
	(City/State and Zip code)	
For further info	rmation concerning this matter, please call:	
Sabrina Ko	tb at (678) 284-1011	
(Nam	of Person) (Area Code & Daytime Telephone Number)	
STREET ADI Registration Sc Division of Co 409 E. Gaines Tallahassee, Fi	ction Registration Section porations Division of Corporations St. P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a c	neck for the following amount:	
□ \$70.00 Filin	g Fee S \$78.75 Filing Fee & S \$78.75 Filing Fee & S \$87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy Certified Copy	ŠŁ.

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.	Sabre Mortgage Solutions, Inc.		<u>.</u>		m
	(Name of corporation; must include the word "INCORPORATED words or abbreviations of like import in language as will clearly in natural person or partnership if not so contained in the name at pro-	ndicate that it is a corporation instead of a			
2.	Georgia 3.	06 1677793			,
	(State or country under the law of which it is incorporated)	(FEI number, if applicable)			
4.	January 31,20035.				
	(Date of incorporation)	Duration: Year corp. will cease to exist or	"perpeti	ıal")	
6.	Upon Qualification				
	(Date first transacted business in Florida. If corporation has not transacted business in Florida. If corporation has not transacted business in Florida.		qualificat	ion.")	
675 Southcrest Parkway, Suite 110 Stockbridge, GA 30281					120 mm
	(Principal office addres	ss)	25	-	# 1
	675 Southcrest Parkway, Suite 110 Stockbridg	e, GA 30281	3SE	=	Parties and
	(Current mailing address	ss)	115	R	
8.	Correspondent Mortgage Lender		LOR	10: 3:	
	(Purpose(s) of corporation authorized in home state or coun	ntry to be carried out in state of Florida)	<u> </u>	₩-	-
9.	Name and street address of Florida registered agent: (F	P.O. Box or Mail Drop Box NOT acce	ptable)		
	Name: Greg Nissen	<u></u>			
О	ffice Address: 11471 West Sample Rd, Suite 18	<u> </u>	,		
	Coral Springs	- Florida 33065			_
	(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.

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

* * *

A. DIRECTORS	
Chairman: N/A	
Address:	
	<u></u>
/ice Chairman: N/A	<u> </u>
Address:	<u>*</u> 77 (
Director: N/A	
Address:	
Director: N/A	
Address:	
3. OFFICERS	SSEE, F
President: Edward P. Hays Address: 675 Southcrest Parkway, Suite 110 Stockbridge, GA 30281	The second secon
Vice President: N/A	
Address:	
ecretary: Meredith Brown	
Address: 675 Southcrest Parkway, Suite 110 Stockbridge, GA 30281	
reasurer: N/A	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional additional actions of the application listing additional actions are also actions and actions are also actions and additional actions are also actions and actions are also actions are also actions and actions are also actions at a second actions are also actions and actions are also actions are also actions and actions are also actions and actions are also actions and actions are also actions at a second actions are also actions are also actions are also actions and actions are also actions are also actions are also actions and actions are also actions are also actions are also actions and actions are also actions actions are also actions actions are also actions actions actions are also actions actions are also actions actions are also actions actions actions actions actions are also actions	
(Signature of Chairman, Vice Chairman, or any officer listed in nu	mber 12 of the application)
4. Edward P. Hays C.E.O/ President (Typed or printed name and capacity of person signing applications)	<u> </u>
(Typed or printed name and capacity of person signing app	plication)

Secretary of State

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

DOCKET NUMBER: 031350689 CONTROL NUMBER: 0305736 EFFECTIVE DATE: 05/08/2003

REFERENCE : 0077
PRINT DATE : 05/15/2003

FORM NUMBER : 611

EPSTEIN BECKER & GREEN PC JOHN W. BOYKIN STE 2700, 945 EAST PACES FERRY RD. ATLANTA, GA 303261380

CERTIFICATE OF NAME CHANGE AMENDMENT

I, Cathy Cox, the Secretary of State and the Corporations Commissioner of the State of Georgia, do hereby certify under the seal of my office that

SABRE MORTGAGE, INC. A DOMESTIC PROFIT CORPORATION

has filed articles of amendment in the Office of the Secretary of State changing its name to

SABRE MORIGAGE SOLUTIONS, INC.

and has paid the required fees as provided by Title 14 of the Official Code of Georgia Annotated. Attached hereto is a true and correct copy of said articles of amendment.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on the date set forth above.



Cathy Cox Secretary of State IN WITNESS WHEREOF, SABRE MORTGAGE, INC., has caused these Articles of Amendment to be executed by its duly authorized officer on this, the 6th day of May, 2003.

SABRE MORTGAGE, INC., a Georgia corporation

Edward P. Hays

Its: President

[CORPORATE SEAL]

SECRETARY OF STATEMENTAROCOCOMPHOS: