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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: COMPASS MORTGAGE, INC DBA GGWC MORTGAGE, 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:

KEVIN A. WILLIAMSON
(Name of Person)
COMPASS MORTGAGE, INC
(Firm/Company)
1001 WARRENVILLE Rd Suite 403
(Address)
Lisle, IL 60532
(City/State and Zip code)

For further information concerning this matter, please call:

KEVIN A. WILLIAMSON at (630) 689-4000
(Name of Person) (Area Code & Daytime Telephone Number)

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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. COMPASS MORTGAGE, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

GGWC MORTGAGE, INC.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. ILLINOIS 3. 36-4322204
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10-28-1999 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. 4306 WEAVER PARKWAY WARRENVILLE IL 60555
(Principal office address)

4306 WEAVER PARKWAY WARRENVILLE, IL 60555
(Current mailing address)

8. RESIDENTIAL MORTGAGE LENDING - MORTGAGE BANKER
(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: GT CORPORATION SYSTEM

Office Address: 1200 SOUTH PINE ISLAND ROAD

PLANTATION, 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 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.

James M. Halpin
Assistant Secretary

James M. Halpin
(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:

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A. DIRECTORS

Chairman: DANIEL SCOTT GRAHAM

Address: 27W330 WALLACE Rd.
WHEATON, IL 60187

Vice Chairman: _____

Address: _____

Director: RUSSELL JOHN GRAHAM

Address: 570 N. ELLIS
WHEATON IL 60187

Director: JAMES ALLEN BOWEN

Address: 415 W UNION
WHEATON, IL 60187

B. OFFICERS

President: DANIEL SCOTT GRAHAM

Address: 27W330 WALLACE Rd.
WHEATON, IL 60187

Vice President: _____

Address: _____

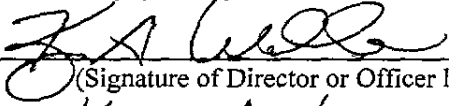
Secretary: CAROL M. KOCHAN

Address: 1001 SOUTHPORT AVE CIRCLE, IL 60532

Treasurer: KEVIN A. WILLIAMSON

Address: 2040 W. WILSBROOK Rd WHEATON IL 60187

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

13. 

(Signature of Director or Officer listed in number 12 of the application)

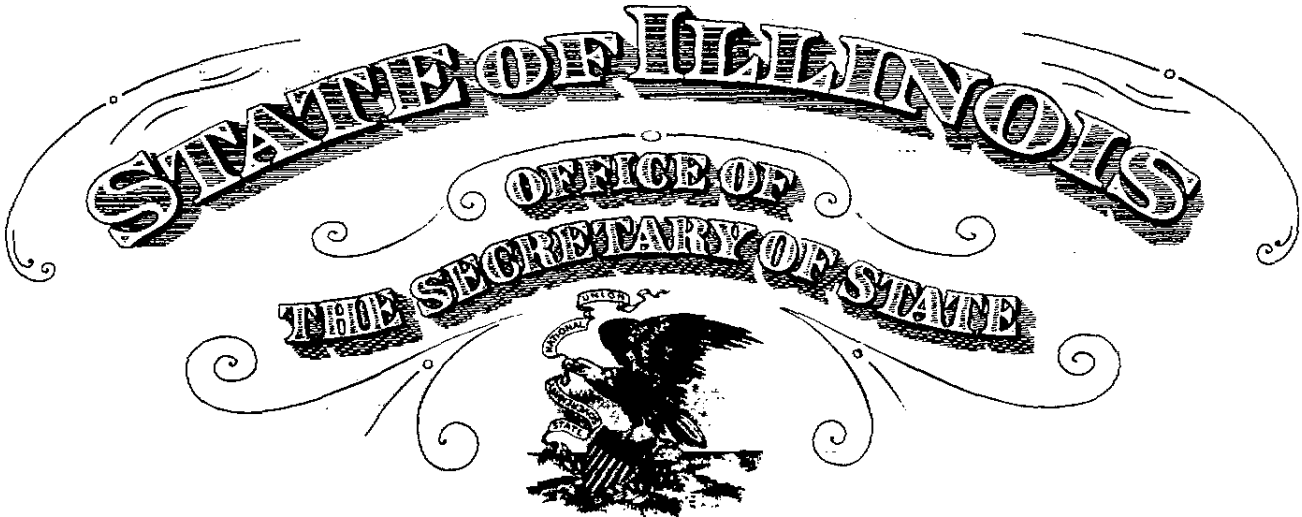
14. KEVIN A. WILLIAMSON VP/CFO/TREASURER

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

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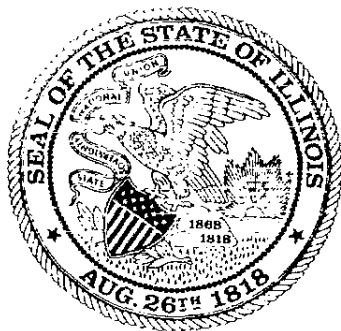


To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

COMPASS MORTGAGE, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE OCTOBER 1999, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE FILING ANNUAL REPORTS AND PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS*****

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In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this

day of JANUARY A.D. 22ND 2004

Jesse White

SECRETARY OF STATE