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### TRANSMITTAL LETTER

Division of Corpo		•					
SUBJECT: Residenti	ial Mortgage Fur	iding Co	rporation				
		_~~	on - must include suffix)	, , , , , , , , , , , , , , , , , , ,			
Dear Sir or Madam:	<b>.</b>						
	', and check are sub		Authorization to Transact B register the above referenced				
Please return all correspon	ndence concerning	this matte	r to the following:				
Todd A. Brown							- 1.
		(Name o	f Person)	·· <del>··</del>	·		
Residential Mortgage	Funding Corpor	ation					*
		(Firm/Co	ompany)				•
2101 Lincolnway Eas	t	, ,				_	
		(Add	lress)				
Mishawaka, IN 46544						, 7	<del>.</del>
	(1	City/State	and Zip code)			<u> </u>	•
For further information co	oncerning this matte	er, please	call:		04 MAR - 1	VISION OF C	
Todd A. Brown	at	574	968-2110		=	유유 무무	
(Name of Person)		(Area	Code & Daytime Telephone	Number)	AM 10: 25	STATE	,
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	e following amoun	t:					
☐ \$70.00 Filing Fee ☐	□ \$78.75 Filing Fe Certificate of S		₹ \$78.75 Filing Fee & ☐ Certified Copy	\$87.50 Filin Certificate Certified C	of Stat		± ·

## 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.

	Il Mortgage Funding Corporation	" "COMPANY " "COPPORATION"	
	f corporation; must include "INCORPORATEI "Corp," "Inc," "Co," or "Corp.")	o, "Company, Corporation,	
	and the second s		** 4
(If name unava	ailable in Florida, enter alternate corporate nam	e adopted for the purpose of transacting but	siness in Florida)
Indiana		30-0093227	
(State or countr	ry under the law of which it is incorporated)	(FEI number, if applicable	e)
June 28, 2		. Perpetual	
(Da	ate of incorporation)	(Duration: Year corp. will cease to exis	t or "perpetual")
Upon Quali			
(Date first trans	sacted business in Florida. If corporation has n (SEE SECTIONS 607.150	ot transacted business in Florida, insert "up 01, 607.1502 and 817.155, F.S.)	on qualification.")
2101 Linco	Inway East Mishawaka, Indiana 4654	14 <u> </u>	
"	(Principal office ad	dress)	-
2101 Lincol	lnway East Mishawaka, Indiana 4654	14	
	(Current mailing ad	dress)	
Mortgage B	roker & Loan Originations		
(Purpose	e(s) of corporation authorized in home state or o	country to be carried out in state of Florida)	
Name and st	reet address of Florida registered agent:	(P.O. Box or Mail Drop Box NOT acc	ceptable)
Name:	Dan Mullins	<u></u>	A SEC
ffice Address:	2021 Juno Circle	<u>anna a</u>	VOF C
	Pensecola	, Florida 32526	
	(City)	(Zip code)	Ģ 8°S
Dogistavad	accentla accentance		25
	agent's acceptance: med as registered agent and to accept serv	vice of process for the above stated com	poration at the place
	is application, I hereby accept the appoint		
	comply with the provisions of all statutes		formance of my duti
ia i am familio	ar with and accept the obligations of my p	osition as registered agent.	
	Dan Ms		
•	(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. DIRECT	ORS		, , <del>-</del> ,
Chairman: To	odd A. Brown		
Address: 210	Ol Lincolnway East Mishawaka, Indiana 46544		<u> </u>
			<u> </u>
Vice Chairmar	n: <b>N/A</b>		·
Address:			<u></u>
		<u>.</u>	* ***
Director: N/A			<u></u>
Address:			
			<u></u>
Director: N/	A		
Address:			· · · · · · · · · · · · · · · · · · ·
	the state of the s		<del></del> :
B. OFFICE	RS	ę,	
President: To	dd A. Brown	04 HAR	\$00.00 \$0.00
Address: 210	01 Lincolnway East Mishawaka, Indiana 46544		95E
_		呈	광유 - 국 <del>**</del>
Vice President	: N/A		三部
Address:			1 ま 
	The state of the s	·	<u>:</u> . :.
Secretary: N/	Α		<u> </u>
Address:			, <u>wa'</u>
Treasurer: N/	A		
Address:		<u>·</u>	
NOTE. If	or forms and many offices on addendum to the small action listing additional account on the distance of the small action additional account on the distance of the small action and the small account of the small action and the small action and the small account of the small action and the small action and the small action and the small action and the small action actions are small actions and the small action actions are small actions and the small action and the small action actions are small actions and the small action actions are small actions and the small actions are small actions and the small action actions are small actions and the small action actions are small actions and the small action actions are small actions and the small actions are small actions are small actions and the small actions are small actions are small actions and the small actions are small actions and the small actions are small actions and the small actions are small actions are small actions and the small actions are		
	cessary, you may attach an addendum to the application listing additional officers and/or di	rectors.	
13	(Signature of Director or Officer listed in number 12 of the application)	· · · · · · · · · · · · · · · · · · ·	
14. Todd A	. Brown, CEO & President	-	المعارض والمطلق فوسات المواد
	(Typed or printed name and capacity of person signing application)		

## STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

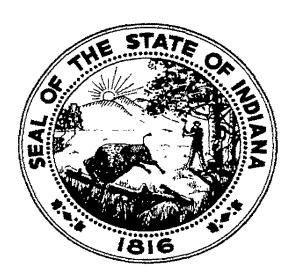
I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

#### RESIDENTIAL MORTGAGE FUNDING CORPORATION

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on June 28, 2002, and was in existence or authorized to transact business in the State of Indiana on December 04

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana Row will the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution experiment has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this Eighth Day of December, 2003.

TODD ROKITA, Secretary of State