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| | (Address) |
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| | (City/State/Zip/Phone #) |
| Ε | CK-UP WAIT MAIL |
| | (Business Entity Name) |
| | (Document Number) |
| Certified (| s Certificates of Status |
| Special | uctions to Filing Officer. |
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| | |
| | Office Use Only |

(Requestor's Name)



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SECRETARY OF STATE
VALLAHASSEE, FLORIE

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13/C

FLORIDA COMPLIANCE SPECIALISTS, INC.



DAVE TAYLOR, PRESIDENT

2331 Hanson Place
Tallahassee, Florida 32301
Voice: (850) 942-5464 Fax (850) 942-5111

www.floridacompliance.com Office Use Only, CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time 3-24-04 Certified Copy Photocopy Certificate of Status Mail out ☐ Will wait AMENDMENTS Amendment rofit Resignation of R.A., Officer/Director ed Liability Change of Registered Agent estication Dissolution/Withdrawal Merger

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| REGISTRATION/SQUALIFICATION |
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| Foreign |
| Limited Partnership |
| Reinstatement |
| Trademark |
| Other |

| Examiner's Initials | |
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PLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

| ame of corporation; must include " | MORTGAGE | GROUP, INC | TION" | |
|--|----------------------------|------------------------------|-------------------------|----------|
| co.," "Corporation; must include Co.," "Corp," "Inc," "Co," or "Cor | p.") | COMPANT, CORPOR | THON, | 5 |
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| | | | يُ رُ | 37.2 |
| unavailable in Florida, enter alter | nata comorata nama adoi | nted for the numose of tran | reacting business in F | Inside) |
| anavanaore mi rorida, enter arter | nate corporate same adop | | /- a | 6 |
| <u> </u> | 3, | 20·0402* | 1 /8 | |
| country under the law of which it | is incorporated) | (FEI number, | if applicable) | 7 |
| 64.7200Z | 5. | PERFETIL | 'AC | |
| (Date of incorporation) | (D | uration. Year corp. will co | ease to exist or "perpe | :tual'') |
| 7/201 | QUALIFICATI | 10 N | | |
| t transacted business in Florida. I | | | insert "upon qualific | ation. |
| (SEE S | ECTIONS 607.1501, 60 | 7.1502 and 817.155, F.S.) | ` | |
| 325 W. AARON | · Do 55 | re Course 1. | 1. 16803 | |
| 2 - 11 111 XXII | (Principal office address) | | <u> </u> | |
| ' | ,r micipai orrice address) | , | | |
| Sans | | | | |
| (| Current mailing address) |) | | |
| n. 1 | / / / | V 1. | | |
| 1100tgAg a | 10 KILINY FOR | end.N. | ATI 11.5 | |
| urpose(s) of corporation authorize | d in home state or countr | y to be carried out in state | of Florida) | |
| and street address of Florida | registered agent: (P.C |). Box or Mail Drop Box | (NOT acceptable) | |
| FI 1: 1 | | - 12 | u | |
| me: Flekida C | mpliance | Sucrafiots - | an . | |
| Iress: 2331 Harvis | D Place | , | | |
| | Γ, | - | | , |
| [Allahass | <u>'</u> | _, Florida <u>\234/</u> | _ | |
| ' (City) | | (Zip code) | | |
| ered agent's acceptance: | | | | |
| en named as registered agent o | and to accept service o | f process for the above | stated corporation (| at the |
| in this application, I hereby a | ccept the appointment | t as registered agent and | d agree to act in this | s cape |
| ree to comply with the provision | | | mplete performanc | e of n |
| amiliar with and accept the ob | ligations of my position | on as registered agent. | | |
| | | | | |
| \sim | | | | |
| | ed agent's signature) | | | |

ment of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

the De

under

12. N

aw of which it is incorporated.

s and business addresses of officers and/or directors:

| | RÈCTORS |
|----|---|
| 8 | 82 W. GERENRIDGE RD. LOCK HAVEN, PA. 17745 |
| | |
| K | FOR EDVADO K DARFILL |
| 3: | 108 PICADILLY RD PORT MONLOA Pa, 16870 |
| :; | LOBERT E. HYVICHOL 425 WINDONERE DR. STOTE COLLEGE, PA. 16801 |
| !- | 425 WINDMORE DR. STOR COLLEGE, (A. 1680) |
| į | FRIC THRE |
| : | 339 MCBETH ST. STATE CALLER, PA. 16803 |
| | <u> </u> |
| 1 | E DARIS. D. WISS. |
| | BL W. GREENRISGE RD. LOCK HOVEN, PA. 17745 |
| i | sident: EDWARD K. DARE III |
| | 108 TICADILLY RO PORT MATILDA, PA. 16870 |
| | THOMAS FRICSON |
| | 320 MERSONLARK LAVE BOALSBURG, PA. 16829 |
| | |
| | |
| ı | If necessary, you may attach an addendum to the application listing additional officers and/or directors. |
| | Halla Q-hill |
| ! | (Signature of Director or Officer listed in number 12 of the application) |
| | Darla D Wise - Director |

X

COMMON WEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

February 02, 2004

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

HOMESTAR MORTGAGE GROUP, INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth