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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 205-0383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 222-9428

FOREIGN PROFIT QUALIFICATION

Main Line - Tavistock Mortgage, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	06
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Corporate Filing

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JB
330-021

**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. Main-Line Tavistock Mortgage, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. New Jersey 3. 57-1199208
(State or country under the law of which it is incorporated) (FBI number, if applicable)
4. 12/11/2003 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. 3 Beryl Rd., Paoli, PA 19301
(Principal office address)

same
(Current mailing address)
8. Mortgage lending
(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: C T Corporation System
Office Address: c/o C T Corporation System, 1200 South Pine Island
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.*
C T Corporation System

By: Connie Bryan
(Registered agent's signature) **CONNIE BRYAN
SPECIAL ASSISTANT SECRETARY**

SECRETARY OF STATE
ALLAH-SEC. F10010

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AND
FILED

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: Linda B. Patton

Address: 3 Beryl Rd.

Paoli, PA 19301

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS SEE ATTACHMENT

President: Linda B. Patton

Address: 3 Beryl Rd.

Paoli, PA 19301

Vice President: _____

Address: _____

Secretary: Linda B. Patton

Address: 3 Beryl Rd. Paoli, PA 19301

Treasurer: Linda B. Patton

Address: 3 Beryl Rd. Paoli, PA 19301

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

13. Linda B. Patton
(Signature of Director or Officer listed in number 12 of the application)

14. Linda B. Patton, President
(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 11/11/01 BY 1045

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Attachment to Florida
Officers & Directors

1. Full Name: Linda B. Patton
Officer/Director: Officer, Director
Officer's Title: President
Director's Title: Chairman
Business Address: 3 Beryl Rd.
City: Paoli
State: PA
ZIP Code: 19301
2. Full Name: Linda B. Patton
Officer/Director: Officer
Officer's Title: Secretary
Business Address: 3 Beryl Rd.
City: Paoli
State: PA
ZIP Code: 19301
3. Full Name: Linda B. Patton
Officer/Director: Officer
Officer's Title: Treasurer
Business Address: 3 Beryl Rd.
City: Paoli
State: PA
ZIP Code: 19301

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

MAIN-LINE TAVISTOCK MORTGAGE, INC.
0100916653

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on December 11, 2003.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

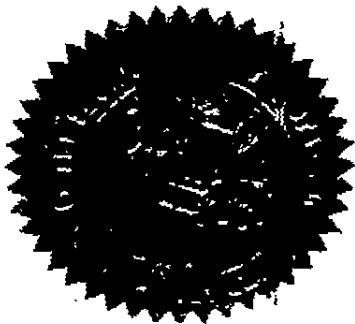
I further certify that the registered agent and registered office are:

*Jeffrey A. Weiner
20 Brace Road Suite 112
Cherry Hill, NJ 08034*

Continued on next page . . .

STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

MAIN-LINE TAVISTOCK MORTGAGE, INC.



IN TESTIMONY WHEREOF, I have
hereunto set my hand and
affixed my Official Seal
at Trenton, this
29th day of March, 2004

A handwritten signature in cursive script, appearing to read "John E. McCormac".

John E McCormac, CPA
State Treasurer