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(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
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Certified Coples	_ Certificate	s of Status
Special Instructions to	Filing Officer:	





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DIVISION OF CORPORATIONS

04 APR -8 PM 3: 00

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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations

SUBJECT: The t	Tome Place (Name of corporat	Mortgage Co.	, Inc.
Dear Sir or Madam:			
The enclosed "Application "Certificate of Existence", transact business in Florid	n by Foreign Corporation fo , and check are submitted to a.	r Authorization to Transact register the above reference	Business in Florida", ed foreign corporation to
Please return all correspon	dence concerning this matte	er to the following:	
MATT COOP	rel		
	•	of Person)	,
The Home	Place Mord (Firm/C	ompany)	nc.
2144 1414	on Drive		
	m Drive (Add	dress)	
Gainesville	e (ma 30er	1	
	(Add e, 64, 3050 (City/State	e and Zip code)	, ········
	, -	• •	
For further information co	ncerning this matter, please	call:	
Kellie Sin6 (Name of Person)	H at (770	532-1128 Code & Daytime Telephor	ext, 236
(Name of Person)	(Area	Code & Daytime Telephor	ie Number)
			APR
STREET ADDRESS:		MAILING ADDRESS:	1 95-
Registration Section		Registration Section	
Division of Corporations 409 E. Gaines St.		Division of Corporation P.O. Box 6327	s မ်္ဘာ့ မ်္ဘာ့ မ်္ဘာ့
Tallahassee, FL 32399		Tallahassee, FL 32314	00
Enclosed is a check for the	following amount:		- 3
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	\$87.50 Filing Fec, 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.

	TORY FIRST	<u> </u>	<u>e co, juric.</u>		
(Enter name of	corporation; must includ	le "INCORPORATED,	e Co., INC. "COMPANY," "CORPORA"	rion,"	
"inc.," "Co.," "	Corp," "Inc," "Co," or "C	Corp.")			
The	Home Place	Mort GAGE	Co. 6F GA. adopted for the purpose of trans		
				_)
2. <u>GE</u>	ORGIA	3.	58-23004 (FEI number, if	29	
				A	ه شد
4	9-7-1990	5.	(Duration: Year corp. will cea	tual	
(Da	e of incorporation)		(Duration: Year corp. will cea	se to exist or "perpetual")	- -
6.	Len	Qualification			
(Date first trans	acted business in Florida (SEI	. If corporation has not E SECTIONS 607.1501	transacted business in Florida, , 607.1502 and 817.155, F.S.)	insert "upon qualification."	")
7. 2144	Hilton Dr.	, GAINESV	ille, GA. 3051	<i>DI</i>	_
		(Principal office add	ress)		
	<u></u>				_
		(Current mailing add	ress)	•	
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/Purnoce	or tange	Landak igad in home state or co	untry to be carried out in state of	f Florida)	<u>₹</u> .
(Purpose	or to see (s) of corporation author	ized in home state or co	untry to be carried out in state of		VIE VIE
(Purpose	(s) of corporation author	ized in home state or co	untry to be carried out in state of		NOISIA : 1
(Purpose 9. Name and str	(s) of corporation author	ized in home state or co	untry to be carried out in state of	NOT acceptable)	AD NOISIA
(Purpose	(s) of corporation author cet address of Florid CT Corporation	ized in home state or co	untry to be carried out in state of	NOT acceptable)	FILE SELRETARY C
(Purpose 9. Name and str	(s) of corporation author cet address of Florid CT Corporation 1200 South Pine	ized in home state or co	untry to be carried out in state of	NOT acceptable)	FILED FILED FILED IN VISION OF GORPON
(Purpose 9. Name and str Name:	(s) of corporation author cet address of Florid CT Corporation 1200 South Pine	ized in home state or co	untry to be carried out in state of	NOT acceptable)	FILED FILED FILED STATE
(Purpose 9. Name and str Name:	(s) of corporation author cet address of Florid CT Corporation 1200 South Pine	ized in home state or co	untry to be carried out in state of	NOT acceptable)	FILED SURETARY OF STATE OF VISION OF CORPORATIONS
(Purpose 9. Name and sti Name: Office Address:	(s) of corporation author cet address of Florid CT Corporation 1200 South Pine Plantation. (City)	ized in home state or co	untry to be carried out in state of	NOT acceptable)	FILED FILED FILED FILED FILED FILED
(Purpose 9. Name and sti Name: Office Address:	(s) of corporation author rect address of Florid CT Corporation 1200 South Pine Plantation (City) agent's acceptance:	ized in home state or co	(P.O. Box or Mail Drop Box Florida 33324 (Zip code)	NOT acceptable) PR - 8 PM 3: 0	FILED FILED FILED FORMATIONS Place
(Purpose 9. Name and sti Name: Office Address: 10. Registered: Having been naidesignated in thi	(s) of corporation author rect address of Florid CT Corporation 1200 South Pine Plantation. (City) agent's acceptance: med as registered agents application, I hereby	ized in home state or co	(P.O. Box or Mail Drop Box (P.O. Box or Mail Drop Box Florida 33324 (Zip code) ce of process for the above sinent as registered agent and	NOT acceptable)	icity. I
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- 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: Barry G. Conner
Address: 2144 Hilton Dr., Ganesville, GA 30501
Vice Chairman: Borry 6. Conner Address: 2144 Hilton Dr. Gainesville GA. 30501
Address: 2144 Hilton Dr. Gainesville, GA. 30501
Director: barry G. Conner Address: 2144 Hilton Dr. GAMESVILLE, GA. 30501
Address: 2144 Hilton Dr., Gainesville, GA. 30501
Director:
Address:
B. OFFICERS
President: Borry G. Conner
Address: Dury G. Conner Address: 2144 Hilton Dr., Gainesville, (na. 3050)
Vice President: NONE
Address:
Secretary: Barry G. Cinner
Address: 2144 1+1+on Dr., Gainesville, GA. 30501 = 5
Treasurer:
Address:
NOTE: If necessary ou 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. Borry G. Conner CEO (Typed or printed name and capacity of person signing application)

Secretary of State

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

CONTROL NUMBER : K016932 DATE INC/AUTH/FILED: 09/07/1990 __ JURISDICTION : GEORGIA : 02/17/2004 PRINT DATE

FORM NUMBER

AMERICA'S HOME PLACE, INC. DIANE EILAND 2144 HILTON DRIVE GAINESVILLE, GA 30501

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of S State of Georgia, do hereby certify under the seal of my office int date

registration provisions is in compliance with of Title 14 of the Official Code

ormed in transact business in Georgia on the above dissolution, certificate of cancellation or Office of the Salaran or Cancellation or attated above or was authorized to cate and has not filed articles of any other similar document with the Office of the Secretary

This certificate relates only to the legal existence of the above-named entity as of the print date above. It does not certify whether or not a notice of intent to dissolve an application for wichdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State

transmitted, issued and certified in This information is accordance with the Georgia Electronic Records and Signatures Act and Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

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Cathy Cox Secretary of State