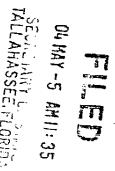
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.
189, 4098, 671 58
Office Use Only
11704-14799



100032256781

04/12/04--01052--014 **78.75 ___





April 8, 2004

Registration Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Re: Mortgage Center of America, Inc.

Dear Sir or Madam:

Enclosed are the following:

1. Transmittal Letter (Florida form)

 Application By Foreign Corporation For Authorization To Transact Business In Florida (Florida form)

3. Registered Agent's signature page

- 4. Certificate of Status Domestic Corporation by the Secretary of State of the State of California for the Mortgage Center of America, Inc.
- Our check in the amount of \$78.75 representing payment of filing fee and a certified copy.

If you have any questions, or if you need any further information to complete our application to transaction business in the State of Florida, please contact me.

Very truly yours,

Kathleen M. Hand

Enclosures

TRANSMITTAL LETTER

TO:	Registration Se Division of Cor			
SUBJ	ECT: Mortgag	ge Center of America, It	nc	
		(Name of corpo	ration - must include suffix)	
Dear S	lir or Madam:			,
"Certif		e", and check are submitted	for Authorization to Transact I to register the above reference	
Please	return all corresp	ondence concerning this m	atter to the following:	
Sherr	y Bullock Han			
		(Nam	ne of Person)	
Mortg	gage Center of	America, Inc.		
		(Firm	n/Company)	
890 C	ak Grove Roz	đ		
		(/	Address)	
Conco	ord, California	94518		
			ate and Zip code)	
For fur	ther information	concerning this matter, plea	ase call:	OL MI SEURE TALLAH
Sherry	Bullock Hand	l at (925) 459-6700	ASS.
	(Name of Perso		rea Code & Daytime Telephone	Number) The
Registr Divisio 409 E.	ET ADDRESS: ation Section on of Corporation Gaines St. assee, FL 32399	s	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	* 35 Rio
Enclose	ed is a check for t	the following amount:		
□ \$ 70.	00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	7 \$78.75 Filing Fee & Certified Copy	3 \$87.50 Filing Fee, Certificate of Status & Certified Copy

LORIDA DEPARTMEN

FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 16, 2004

KATHLEEN M. HAND 890 OAK GROVE RD CONCORD, CA 94518

SUBJECT: MORTGAGE CENTER OF AMERICA, INC.

Ref. Number: W04000014799

We have received your document for MORTGAGE CENTER OF AMERICA, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of aname is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 204A00025216

Division of Corporations P.O. ROY 6227 Tollahaggas Florida 92214

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.

Duration: Year corp. w ansacted business in Flo 07.1502 and 817.155, F	rida, insert "upon du S.) A	₹
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	O. Box or Mail Drop , Florida (Zip co of process for the about as registered agent tive to the proper and	try to be carried out in state of Florida) O. Box or Mail Drop Box NOT acceptate , Florida (Zip code) of process for the above stated corporate as registered agent and agree to act in tive to the proper and complete performition as registered agent.

- 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:

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

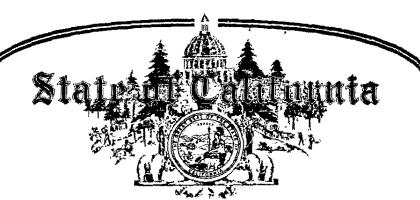
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (State or country under the law of which it is incorporated) (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual") (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.) (Principal office address) (Current mailing address) (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: Fiorida Registered Agents, Inc. Office Address: 122 West Hillcrest Street Altamonte Springs , Florida 32714 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.

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.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors:

A. DIRECTORS	•
Chairman:	
Address:	. –
Vice Chairman:	<u></u>
Address:	
Director:	
Address:	<u> </u>
Director:	> ₂ →
Address:	SE < 5 -
	-11" ZZ
B. OFFICERS	Lorino de la companya
President: William J. Hand, Jr.	<i>D</i>
Add Wilson Lane	
Vice President:	
Address:	
Sherry Bullock Hand	
Address: 4052 Wilson Lane, Concord, California 94521	
Treasurer: Stephane Musacchio	
Address: 112 Genoa Court, Walnut Creek, California 94598	
NOTE: If necessary, you may attach an addendum to the application list	ing additional officers and/or directors.
(Signature of Director or Officer listed in number 12 of the	ne application)
4 William J. Hand, Jr., President	
(Typed or printed name and capacity of person si	gning application)



SECRETARY OF STATE

CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, KEVIN SHELLEY, Secretary of State of the State of California, hereby certify:

That on the 27TH day of SEPTEMBER, 1999, MORTGAGE CENTER OF AMERICA, INC. became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That no record exists in this office of a certificate of dissolution of said corporation nor of a court order declaring dissolution thereof, nor of a merger or consolidation which terminated its existence; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of March 1, 2004.

KEVIN SHELLEY Secretary of State