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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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## TRANSMITTAL LETTER

TO:	Registration Se- Division of Cor				
SUBJ		-	Nortgage, I pration - must include suffix)	nc.	
DODO	EC1	(Name of corpo	oration - must include suffix)		•
Dear S	ir or Madam:		-		
"Certif		e", and check are submitted	n for Authorization to Transac I to register the above reference		
Please	return all corresp	ondence concerning this m	natter to the following:		
	-	<del>-</del>			
	Dragn	Vea 1 (Nar	ne of Person)		• **;
	5	N ( 100 ./	>		
	15000	tord Mort	gage Inc	<u> </u>	- ***
	C118 0	~ ,	n/Company)	<i>&gt;</i>	
	6700	penceli	Suite 21.	<u> </u>	. <u>.</u> -
	, 0	(	Address)  372/7 tate and Zip code)		
	Nasha	sille TU	37211		
		(City/S	tate and Zip code)		
For fur	ther information	concerning this matter, ple	ase call:		
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	(Name of Perso	on) (A	rea Code & Daytime Telepho	one Number)	SEC
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				ne Number) 2 H 24	PAR CARE
	ET ADDRESS:		MAILING ADDRESS	: <del></del>	200
	ration Section on of Corporation	۹	Registration Section Division of Corporation	ns =	OR ST
	Gaines St.	•	P.O. Box 6327	ب	
Tallaha	issee, FL 32399		Tallahassee, FL 32314	- ta	) AS
Enclos	ed is a check for	the following amount:		_	
<b>5</b> \$70	.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filling Fee & Certified Copy	\$87.50 Filing Fee, 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.

1. Bradford Mortgage Inc. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"	<u> </u>	
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"		
"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")		
Bradford Home Mottgage Inc. (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business	**	٠.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business	ss in Florida)	
2 TN/ 460 3 65-1844514		
2. State or country under the law of which it is incorporated)  (FEI number, if applicable)		
4. 1-11-01 5. Aprile form (Date of incorporation) (Duration: Year corp. will cease to exist or		
(Date of incorporation) (Duration: Year corp. will cease to exist or	"perpetual")	
" " A S S S S S S S S S S S S S S S S S		
6. "upon qualification"  (Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon q	walification "	•
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	dattication.	
	٠ ١	بيسار
7. 640 Spence Liv. Suite 215 Mashville. (Principal office address)	(11 <u>,57,71)</u>	
(Current mailing address)	in a	
(Current mailing address)		
Mantaga		
8. Most tagge Company (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)		
(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 accepta	able)	
Vine Co. I. C. a. M. Cara 1 = 30 001DA	0	
Name: Compliance Consulting Cosp. OF 7 CORIDA	40 35 35	1
Office Address: 521 Lake Que. Sy 4	O4 MAY 24	) ] 
Lake Worth, Florida 33460 (City) (Zip code)	72 9	がた
(City) (Zip code)	£-7	怨
	RPORA	S S
10. Registered agent's acceptance:		;≥
Having been named as registered agent and to accept service of process for the above stated corporal		
designated in this application, I hereby accept the appointment as registered agent and agree to act i further agree to comply with the provisions of all statutes relative to the proper and complete perfort		
and I am familiar with and accept the obligations of my position as registered agent.	oj mij mi	وق ۵۰۰۰

- (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:

Address:	Bradfordk 440 Drit		ircle			<u></u>		
	Lebanon	· >~>	7087					
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resident:	Bradferd	KNea			<u> </u>			<u> </u>
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Secretary of State **Division of Business Services** 312 Eighth Avenue North 6th Floor, William R. Snodgrass Tower Nashville, Tennessee 37243

ISSUANCE DATE: 05/05/2004 REQUEST NUMBER: 04126150 TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 01/10/2001 STATUS: ACTIVE CORPORATE EXPIRATION DATE: PERPETUAL CONTROL NUMBER: 0401581 JURISDICTION: TENNESSEE

BRADFORD MORTGAGE, INC. 640 SPENCE LANE SUITE 215 NASHVILLE, TN 37217

REQUESTED BY: BRADFORD MORTGAGE, INC. 640 SPENCE LANE SUITE 215 NASHVILLE, TN 37217

## CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT "BRADFORD MORTGAGE, INC."

IS A CORPORATION DULY INCORPORATED UNDER THE LAW OF THIS STATE WITH DATE OF INCORPORATION AND DURATION AS GIVEN ABOVE; THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE EXISTENCE OF THE CORPORATION HAVE BEEN PAID; THAT THE MOST RECENT CORPORATION ANNUAL REPORT REQUIRED HAS BEEN FILED WITH THIS OFFICE; AND THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND THAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED

FOR: REQUEST FOR CERTIFICATE

ON DATE: 05/05/04

FROM: BRADFORD MORTGAGE INC 640 SPENCE LANE

NASVHILLE, TN 37217-0000

FEES \$20.00 RECEIVED:

\$0.00

TOTAL PAYMENT RECEIVED:

\$20.00

RECEIPT NUMBER: 00003498172 ACCOUNT NUMBER: 00353321



RILEY C. DARNELL SECRETARY OF STATE