

FO4000004755

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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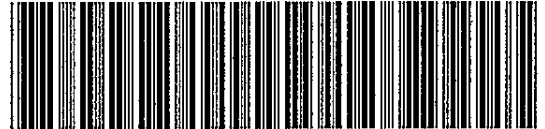
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FO4-4755
OK



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

August 11, 2004

BRIAN MARTINDALE
14 S. COURT STREET
SULLIVAN, IN 47882

SUBJECT: NORTHSTAR MORTGAGE FUNDING, INC.
Ref. Number: W04000030674

We have received your document for NORTHSTAR MORTGAGE FUNDING, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

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) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 104A00049763

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: North Star Mortgage Funding, Inc.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Brian Martindale
(Name of Person)
North Star Mortgage Funding Inc.
(Firm/Company)
14 S. Court St
(Address)
Sullivan IN 47882
(City/State and Zip code)

For further information concerning this matter, please call:

Brian Martindale at (812) 268-4001
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing 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. North Star Mortgage Funding, 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. Indiana 3. 06-1700219
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. June 23, 2003 5. —
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Perpetual
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 14 South Court St Sullivan IN 47882
(Principal office address)

- 14 South Court St Sullivan IN 47882
(Current mailing address)

8. Expansion of economic potential.
(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 NOT acceptable)

Name: Vaughn A. Rees

Office Address: 344 North Seaport Blvd.

CAPE CANAVERAL, Florida 32920
(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.


(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:

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TALLAHASSEE, FLORIDA

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A. DIRECTORS

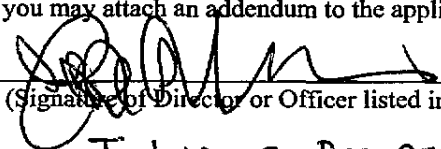
Chairman: Joshua C. Reeves
Address: 330 W Washington St
Sullivan IN 47882
Vice Chairman: Vaughn Reeves
Address: 2122 Lakeview Drive
Sullivan IN 47882
Director: J. Christopher Reeves
Address: 302 W Washington St
Sullivan IN 47882
Director: Vaughn Reeves, Jr
Address: 911 Hillside Drive
Sullivan IN 47882

B. OFFICERS

President: Joshua C Reeves
Address: 330 W Washington St
Sullivan IN 47882
Vice President: J. Christopher Reeves
Address: 302 W Washington St
Sullivan IN 47882
Secretary: Vaughn Reeves
Address: 2122 Lakeview Drive Sullivan IN 47882
Treasurer: Vaughn Reeves, Jr
Address: 911 Hillside Drive Sullivan IN 47882

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NOTE: If necessary, you 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. Joshua C Reeves
(Typed or printed name and capacity of person signing application)

STATE OF INDIANA
OFFICE OF THE SECRETARY OF STATE
CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

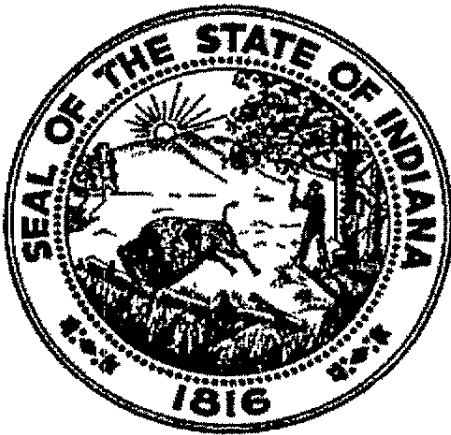
I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

NORTHSTAR MORTGAGE FUNDING, INC.

duly filed the requisite documents to commence business activities under the laws of State of Indiana on June 23, 2003, and was in existence or authorized to transact business in the State of Indiana on July 29, 2004.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Twenty-Ninth Day of July, 2004 .

A handwritten signature in black ink, reading "Todd Rokita".

TODD ROKITA, Secretary of State

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