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(Re	questor's Name)				
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(City	//State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
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Certified Copies	Certificates	of Status			
Special Instructions to F	Filing Officer:				
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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Signature Mortgage Funding, Inc.	;,				
	rporation - must include suffix)				
Dear Sir or Madam:					
	ion for Authorization to Transact Business in Florida," tted to register the above referenced foreign corporation to				
Please return all correspondence concerning this	s matter to the following:				
Dway	ne M. Thompson				
1)	Name of Person)				
Signature Mortgage Funding, Inc.					
(Firm/Company)					
8250 H	averstick Road, Suite 295				
	(Address)				
Indi	anapolis, IN 46240				
(Cit	//State and Zip code)				
For further information concerning this matter,	please call:				
Dwayne M. Thompson at (
(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				
Enclosed is a check for the following amount:					
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of State					

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. Signature Mor	tgage Funding, Inc.			
	corporation; must include "INCORPORAT Corp," "Inc," "Co," or "Corp.")	ED	" "COMPANY," "CORPORATION,"	
				2 ~
(If name unavai	lable in Florida, enter alternate corporate na	une	adopted for the purpose of transacting business in Florida)	
2. Indiana		3.	43-2020542	. 'O
(State or country	under the law of which it is incorporated)	-	(FEI number, if applicable)	
4. July 02, 2003		5.	Perpetual	
(Date	e of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")	96
6. Have not yet t	ransacted business in Florida. Planned	d fo	r June, 2005	A.
	· ·		n Florida, if prior to registration) 502, F.S., to determine penalty liability)	
9050 11			552, 1.3., to determine penalty habitity)	
7. 6250 Haversuc	k Road, Suite 295, Indianapolis, IN 462 (Principal office		rec)	
Same as above	` '	444	1009	
Same as above	(Current mailing	add	ress)	
	(,		,	
_{8.} Mortgage Brok	erage Firm			
(Purpose(s) of corporation authorized in home state of	or co	ountry to be carried out in state of Florida)	
9. Name and stree	et address of Florida registered agent: ((P.C	O. Box NOT acceptable)	
Name:	Danielle R. Thompson			
Office Address:	30A 10th Avenue N.			
	Jacksonville		, Florida 32250	
	(City)			

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:

A. DIRECTORS
Chairman: 32250
Address:
Vice Chairman:
Address:
Director:
Address:
in the second se
Director:
Address:
B. OFFICERS
President: Dwayne M. Thompson
Address: 8250 Haverstick Road, Suite 295
Indianapolis, IN 46240
Vice President: Same
Address:
Secretary: Same
Address:
Treasurer: Same
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. Course Oliver Olive
Dwayne M. Thompson, President, Signature Mortgage Funding, Inc.
(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

SIGNATURE MORTGAGE FUNDING, INC.

duly filed the requisite documents to commence business activities under the laws of State of Indiana on July 02, 2003, and was in existence or authorized to transact business in the State of Indiana on October 13, 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 Thirteenth Day of October, 2004.

TODD ROKITA, Secretary of State

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