TU5000000880

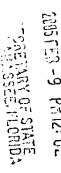
(Re	questor's Name)	
(Ade	dress)	
(Add	dress)	
(Cit)	//State/Zip/Phone	e #)
(Oit)	rotatorzipit none	-
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nan	ne)
•	•	,
	cument Number)	
(200	zament (vamber)	
Certified Copies	Certificates	of Status
Special Instructions to F	ilina Officer.]
		į
		4
		}
]
		S
		į
		{





800046192608

02/09/05--01032--006 **78.75



VOS-880



To Whom It May Concern:

Please feel free to contact me if there are any other items needed for this application. I can be reached at either 419-339-1003 (office) or 419-233-7007 (cell) or my email is mark@limamarketplacemortgage.com. Thank you for your time.

Sincerely yours

Mark L. Mahlmeister

2005 FEB -9 PH 12: 02

TRANSMITTAL LETTER

TO:	Registration Se Division of Co					
SUBJ	IECT:	LIMA MA	CKETPI	ACE MORT	GAGE 7	~c.
		(Name of co	rporation - r	nust include suffix)		
Dear S	Sir or Madam:					
"Certi		ation by Foreign Corpora ce," and check are submi orida.				
Please	return all corres	spondence concerning thi	s matter to tl	he following:		
		MARK C. A	JAHCM.	EISTER		
		MARK C. M	Name of Per	son)		
		LIMA MARKE () 5309 NESBI ELIDA / OA (Cit	<i>THACE</i> Firm/Compa	<u> 1627646E</u> ny)	INC.	· · · · · · · · · · · · · · · · · · ·
		5309 NESBI	17 ST.	SUITE	A	
		·	(Address)			
		ELIDA / OA	y	45807		
		(Cit	y/State and 7	Zip code)		
For fu		n concerning this matter,			ار اران اران اعن	2005 FEB -9
MAK	(Name of Pers	at (_ son)	419) (Area Code	297 - 50 & Daytime Teleph	off Some Number)	-9 PH 12: 02
	STREET AD Registration So Division of Co 409 E. Gaines Tallahassee, F	ection orporations St.		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	SUPERIOR OF SUPERI
Enclos	sed is a check for	r the following amount:				
CJ \$70	0.00 Filing Fee	\$78.75 Filing Fee Certificate of Stat	& 🗇 \$73 us Ce	8.75 Filing Fee & crtified Copy	S87.50 Fili Certificate Certified (of Status &

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

REGISTER A FO	E WITH SECTION 607.1503, FLORIDA STA REIGN CORPORATION TO TRANSACT BU	SINESS IN THE STATE OF FI	LORIDA.
(Enter name of countries," "Co.," "Co	MA MARKETP/ACE Notes of the corporation, must include "INCORPORATED," "Corp.," "Inc.," "Co.," or "Corp.")	10R7GAGE IN COMPANY," "CORPORATION	<u>C</u> .
(If name unavail	lable in Florida, enter alternate corporate name add	opted for the purpose of transacting	g business in Florida)
2. (State or country	Ohio under the law of which it is incorporated) 3.	57- // 625	/8 licable)
	<u>L 9 2003</u> 5		
6	(Date first transacted business in F		
7 5309	(SEE SECTIONS 607.1501 & 607.1502	, F.S., to determine penalty liabili	
F209	(Principal office address NES 13 17 17. Suite A	of Elina Du	45.817
	(Current mailing address	s)	<u> </u>
8. (Purpose(ORIGINATE MORTGAGE s) of corporation authorized in home state or count	E LOANS try to be carried out in state of Flo	rida)
9. Name and street	et address of Florida registered agent: (P.O. E	Box NOT acceptable)	2005
Name:	Gene Cunningham	_	部四
Office Address:	28100 Us Highway 19 N Suite 506		ASSE ASSE
	Clearwater	, Florida 33761	PH 12: UL
	(City)	(Zip code)	弱。
Having been nam designated in this further agree to c	gent's acceptance: ned as registered agent and to accept service of application, I hereby accept the appointment omply with the provisions of all statutes relative with and accept the obligations of my positions.	it as registered agent and agre- tive to the proper and complete	corporation at the place e to act in this capacity. I
	£ 1 ~		
	(Registered agent's signature)		<u></u>
	certificate of existence duly authenticated, no State, by the Secretary of State or other office		

under the law of which it is incorporated.

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

A. DIRECTORS				
Chairman:	MARK L.	MAHLI	NEISTER	
			RIDGE DR.	
			45807	
Vice Chairman:		· · · · · · · · · · · · · · · · · · ·		
Address:				
Director:				
Address:				
Director:				
Address:				
B. OFFICERS				
President:	MARK L	MAHL	MEISTER	
Address:	5486	RIVER	RIDGE DR.	
	EliDA,	OH.	45807	
Address:				-1, 2
				SECT .
Secretary:				
-				-9 1
				TO T
Treasurer:				RATE
Address:				<u> </u>
NOTE: If necessar	ry, you may attach a	an addendumyt	o the application listing additional of	ficers and/or directors.
13.	Hure 7	Popular	meiste	
	(Signature of Di	rector or Offic	er listed in number 12 of the applicat	ion)
14	MARK	1 C. M.	AHCMEISTER	
	(Typed or prin	ited name and	capacity of person signing application	n)

United States of America State of Ohio Office of the Secretary of State

I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show LIMA MARKETPLACE MORTGAGE, INC., an Ohio corporation, Charter No. 1380964, having its principal location in Elida, County of Allen, was incorporated on April 09, 2003 and is currently in GOOD STANDING upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 24th day of January, A.D. 2005

Ohio Secretary of State

Validation Number: V200524J133EF