

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

From:

Account Name

Account Number : 110450000714

Phone

Fax Number

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•	:	(850)205-0383		
me	2	CORPDIRECT AGENTS, INC.		
mber		110450000714		
		(850)222-1173		
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Comporate Elling

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under the law of which it is incorporated.

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

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H050000856993

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.

	4.00	," "Co," or "C	, ,							
(If name unav	silable in Flo	orida, enter al	ternate corp	orate name	adopted	for the purpo	ec of transac	cting business	in Florida	<u>)</u>
2.	Virgin	ia		3.	54-1922037 (FEI number, if applicable)					
(State or count	ry under the	inw of which	it is incorpo	rated)		(FEI	number, if a	ipplicable)		
4.	11/20/	1998		5.	Der	metual				
Q)	are of incorp	oration)			(Durat	ion: Year co	rp. will cease	e to exist or ")	perpetual"	5
6	upon_q	ualifica	ation_			•				
(Date first tran	sacted busine	ess in Florida.	. If corporat	ion has no	transac 607.15	ted business i 02 and 817.1.	n Florida, in 55, F.S.)	sen "upon qu	alification	. ")
7	3905 N	ational	Drive,	Suite	270	Burton	sville,	Marylar	nđ 208	56
			(Principal	office add	ess)					_
	3905 N	ational	Drive,	Suite	270	Burton	sville,	Marylar	nd 208	55
<u></u>			(Current n	nailing add	est)					_
	Mowtes	es Tandi							ずら	0
8	MOLLYA	de reude	er/Brok	er					ECI	· _
8(Purpose	t(s) of corpor	ration authori	zed in home	er state or co	untry to	be carried ou	t in state of	Florida)	FORT	黄工
8(Purpose 9. Name and st	e(s) of corpor	ration authori	er/Brok zed in home registere	er : state or co d agent: (untry to	be carried ou	nt in state of Drop Box N	Florida)	ECKETAR DIAMAGE	第一二
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8. (Purpose 9. Name and si Name: Office Address:	reet address NRAI Serv 2731 Exec	ge Lenderation authorics of Floridatices, Inc.	er/Brok zed in home registere Orive, Suite	er : state or co d agent:	P.O. B	be carried ou	nt in state of Prop Box N	Florida)	ECKETARY OF STAIL	FILE 39
9. Name and si Name: Office Address:	reet address NRAI Serv 2731 Execution	ration authori s of Florida ices, Inc. cutive Park I	er/Brok zed in home a registere Drive, Suite	er state or co d agent:	P.O. B	be carried ou ox or Mail I	nt in state of Orop Box N	Florida)	ECKETARY OF STAIL	FILE 39
		(City)	er/Brok zed in home a registere Orive, Suite	er : state or co d agent:	P.O. B	be carried ou ox or Mail I Florida 3333	nt in state of Orop Box <u>N</u> 31	Florida)	ECKETARY OF STAIL	FR -7 M 8: 39
7. (Purpose 9. Name and si Name: Office Address:	agent's acc	(City)				(Zi	ip code)			
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A. DIRECTORS	
Chairmag:	
Address:	
Vice Chairman:	
Address:	
Disease	
Director:	
Address:	
Address:	
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B. OFFICERS	F I APR
President: Stacy Snyder	
Address: 3905 National Drive, Suite 270	
Burtonsville, Maryland 20866	77 =
Vice President:	08 08 08 08 08 08 08 08
Address:	OF 9
Socretary:	
Address:	
Treasurer;	
Address.	
NOTE: If necessary, you may attach an addendum to the application listing additional	officers and/or directors.
13. Stary Dryker	
(Signature of Director or Officer listed in number 12 of the application) Stacy Snyder, President	}
(Typed or printed name and capacity of person signing applicat	tion)

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Communication althor Hirginia



State Corporation Commission

I Certify the Following from the Records of the Commission:

Capital Quest Mortgage, Inc. is a corporation existing under and by virtue of the laws of Virginia, and is in good standing.

The date of incorporation is November 24, 1998.

Nothing more is hereby certified.

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SECRETARY OF STATE



Signed and Sealed at Richmond on this Date: April 6, 2005

Joel H. Peck, Clerk of the Commission

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