F05002002015

2005 APR -5 P 2: 41

•		SECRETARY TALLAHASSE
(Re	equestor's Name)	30 55n at 1111 (25 Cb.)
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAΠ	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
		MI.
	· · · · · · · · · · · · · · · · · · ·	

Office Use Only



200049563382

FILED

TRANSMITTAL LETTER

2985 APR -6 P 2: 41

SECRETION OF

TO:	Registration Section	TALLAHASSEE. FLORIDA
	Division of Corporations	
SUBJI	ECT: Worldwide Mortguge (Name of corporation - mus	And Finance, Inc
	(Name of corporation drus	t include suffix)
	· -	·
Dear Si	ir or Madam:	

(Name of corporation drivest include suffix)			
Dear Sir or Madam:			
	," and check are submitted	for Authorization to Transa to register the above refere	ct Business in Florida," nced foreign corporation to
Please return all correspo	ondence concerning this ma	tter to the following:	
De	idre Sh	annon	
,	(Nam	e of Person)	
Worldwide Mortgage and Finance Inc.			
1	U O (Firm	/Company)	/
4747 Lincoln Mall DR. Stc. 605			
m. Hans) (A	Address)	
Mathe	in, IL w	0442	
— · · · ·	(City/Sta	ate and Zip code)	
For further information c	oncerning this matter, plea	se call:	
01			
Delittle Shannon at (108), 539, 2555 (Name of Person) (Area Code & Daytime Telephone Number)			
(Name of Person) (Area Code & Daytime Telephone Number)			
STREET ADDI		MAILING A	
Registration Section Registration Section			
Division of Corporations 409 E. Gaines St. Division of Corporations P.O. Box 6327			
Tallahassee, FL 32399 Tallahassee, FL 32314			
1 ditalia 300, 1 1 323/) 1 ditalia 300, 1 1 323/			
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 FILED

IN COMPLIANCE	E WITH SECTION 60	7.1503, FLORIDA S	TATUTES, TH	E FOLLOWING IS	SUBMITTED T	ro
LEGISTERA FO	E WITH SECTION 601. PREIGN CORPORATION A. L.	IN TO TRANSACT.	DUSINESS IN	inesialeoffi	Aigh Will -P	P 2: 4
(Enter name of	ide Mor to a corporation; must include Corp," "Inc," "Co," or "Co	"INCORPORATED	" "COMPANY	," "CORPORATION	CLATTAGA E	OF STATE
"Inc.," "Co.," "C	lorp," "Inc," "Co," or "Co	orp.")				rr Luki(),
(If name unavai	lable in Florida, enter alt	ernate corporate name	/adopted for the	purpose of transactin	g business in Flo	rida)
2/	11 no15	3.	3(1 4247	907	
(State or country	under the law of which	it is incorporated)	$\mathcal{D}_{\mathbf{A}}$	(FEI number, if appl	icable)	
4 <u>ろ</u>	-8-00	5.		rpetua	<u> </u>	
(Dat	e of incorporation)		(Duration: Yo	ear corp, will cease to	exist or "perpetu	ıal")
5	M/A	· · · · · · · · · · · · · · · · · · ·				
		t transacted business i NS 607.1501 & 607.1			ty)	
, 4747	Lincoln	mall	DR S	H. 605		
		(Principal office add				
Mar	teson,	IL 609	143			
		(Current mailing add	iress)			
_						
Purpose(s) of corporation authoriz	zed in home state or co	ountry to be carr	ied out in state of Flo	rida)	
. Name and stre	et address of Florida re					
Name:	Incorp 5	ervices, In	<u>د</u>			
Office Address:	Incorp S 103 North Tallahassee	Meridian !	St.			
	T.11.6			3 73 - 1		
	19/14/19 3326	City)	, Florida	(Zin code)		
				(2.17 0000)		
	gent's acceptance: <i>ied as registered agent</i>	and to accept semi	ice of process t	or the above stated	composition at	the place
lesignated in this	application, I hereby	accept the appoints	nent as registe	red agent and agree	e to act in this c	capacity. I
urther agree to c ind I am familias	omply with the provisi with and accept the o	ons of all statutes r	elative to the p	roper and complete	performance o	of my dutie
	with accept the o	onemions of my po	amous na tekni	eren akeur		

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.

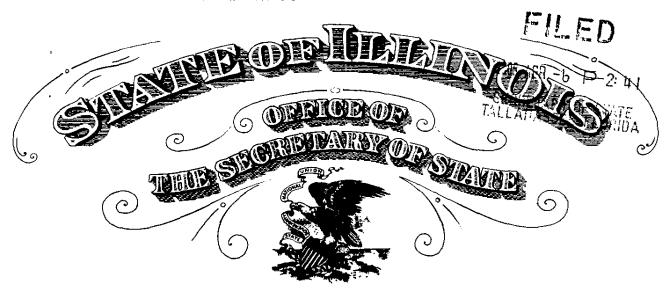
(Registered agent's signature)

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

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A. DIRECTORS

Chairman:	2005 AFA -h P 2:41
Address:	SECRETARY OF STATE
	TOULE, FLORIDA
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: Ramon Jackson	
Address: 4747 Lin Coln Mall DR. SH	.605
matterson, Il 60443	
Vice President:	
Address:	
Secretary: Delare Shannon	17.00
Address: 47 47 Lin Coln Mall DR. Ste.	405 Matildon, Th
Treasurer:	
Address:	
prompt to the first of the Paris Addition	.1 - 60
NOTE: If necessary, you may attach an addendura to the application listing additional	at officers and/or directors.
13 (Signature of Director or Officer listed in number 12 of the app	lication)
14. Ramon Jackson AR	esident/C.E.O.
(Typed or printed name and capacity of person signing applic	eation)



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of

the State of Illinois, this

31ST

day of

MARCH

A.D.

2005

Desse White

SECRETARY OF STATE