# F05000004389

|                           | (Requesto          | or's Name)   |             |  |
|---------------------------|--------------------|--------------|-------------|--|
|                           | (Address)          |              |             |  |
| 1                         | (Address)          | <u>,</u>     | <del></del> |  |
|                           | (City/State        | /Zip/Phone   | ·#)         |  |
| PICK-UP                   |                    | WAIT         | MAIL        |  |
| (                         | (Busin <b>es</b> s | Entity Nan   | ne)         |  |
|                           | Documer            | nt Number)   |             |  |
| Certified Copies          |                    | Certificates | of Status   |  |
| Special Instructions      | to Filing (        | Officer:     |             |  |
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SECRETARY OF STATE
AND CHASSEE, FLORIU

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### TRANSMITTAL LETTER

| TO: Registration Section Division of Corporations                   |  |  |  |
|---|--|--|--|
| SUBJECT: Quality Home Loans, Inc                                    | •  |  |  |
|   | oration - must include suffix)   |  |  |
| Dear Sir or Madam:  |  |  |  |
|   | n for Authorization to Transact Business in Florida," d to register the above referenced foreign corporation to  |  |  |
| Please return all correspondence concerning this m                  | natter to the following:   |  |  |
| Sandy Mamo  |  |  |  |
| (Nar  | ne of Person)  |  |  |
| Mark K. Rabidoux, PLC   | •  |  |  |
| (Firm   | n/Company)   |  |  |
| 343 S. Main Street, Suite 201                                       |  |  |  |
| (   | Address)   |  |  |
| Ann Arbor, MI 48104   |  |  |  |
| (City/S   | tate and Zip code)   |  |  |
| For further information concerning this matter, ple                 | HAT U  |  |  |
| Sandy Mamo at (248  | 3 225-3908 SS November 2   |  |  |
|   | Area Code & Daytime Telephone Number 9   |  |  |
| STREET ADDRESS:   | MAILING ADDRESS:   |  |  |
| Registration Section Division of Corporations                       | Registration Section Division of Corporations  |  |  |
| 409 E. Gaines St.   | P.O. Box 6327  |  |  |
| Tallahassee, FL 32399   | Tallahassee, FL 32314  |  |  |
| Enclosed is a check for the following amount:                       |  |  |  |
| ☐ \$70.00 Filing Fee   ☐ \$78.75 Filing Fee & Certificate of Status | <ul> <li>         \$78.75 Filing Fee &amp; ☐ \$87.50 Filing Fee,         Certified Copy         Certified Copy</li></ul> |  |  |

#### MARK K. RABIDOUX, PLC

ATTORNEY AND COUNSELOR 343 South Main Street, Suite 201 Ann Arbor, Michigan 48104

Fax (734) 994-6134 www.mortgageattorney.net

Mark K. Rabidoux, Esq. Certified Mortgage Banker (248) 225-3920 rabidoux@sbcglobal.net Sandra M. Mamo Legal Assistant (248) 225-3908 smmamo@sbcglobal.net

July 22, 2005

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

Dear Ms Cushing:

Per your letter dated July 11, 2005, I have enclosed the application for foreign authorization of Quality Home Loans, Inc. with an alternate name added.

I may be reached at (248) 225-3908 if you have any questions or need additional information to approve this application. Thank you.

Sincerely,

MARK K. RABIDOUX, PL Professional Limited Liability Complety

> Sandy Mamo Legal Assistant

Enclosure



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 11, 2005

SANDY MANO MARK K. RABIDOUX, PLC 343 S. MAIN STREET, SUITE 201 ANN ARBOR, MI 48104

SUBJECT: QUALITY HOME LOANS, INC.

Ref. Number: W05000033161

We have received your document for QUALITY HOME LOANS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6913.

Diane Cushing Document Specialist

Letter Number: 505A00045661

## 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. Quality Home Loans, Inc. |                      |  |  |                            |  |  |
|-----------------------------|----------------------|--|--|----------------------------|--|--|
|                             |                      | poration; must include "INCORPORATED<br>p," "Inc," "Co," or "Corp.")   | ," "COMPANY," "CORPORATIO  | N,"                        |  |  |
|                             | QHL, Inc.            | to the second of |  |                            |  |  |
|                             | (If name unavailable | le in Florida, enter alternate corporate nam   | e adopted for the purpose of transacti   | ng business in Florida)    |  |  |
| 2.                          | California           |  | 22-3848508   |                            |  |  |
|                             | (State or country un | der the law of which it is incorporated)   | (FEI number, if ap   | plicable)                  |  |  |
| 4.                          | 12/04/2001           | <u></u>  | _perpetual   | a jan a sama a jan jan jan |  |  |
|                             | (Date of             | f incorporation)   | (Duration: Year corp. will cease t   | to exist or "perpetual")   |  |  |
| 6.                          | N/A                  | and the second of the second o | and the second of the second o |                            |  |  |
|                             |                      |  | in Florida, if prior to registration)  |                            |  |  |
|                             |                      | (SEE SECTIONS 607.1501 & 607.  | 1502, F.S., to determine penalty liabi   | lity)                      |  |  |
| 7.                          | 300 E. Esplanade     | Drive, Suite 1250, Oxnard, CA 93036  | s №  |                            |  |  |
|                             |                      | (Principal office ad   | dress)   |                            |  |  |
|                             | 300 E. Esplanade     | Drive, Suite 1250, Oxnard, CA 93036  |  |                            |  |  |
|                             | <u> </u>             | (Current mailing ad  |  |                            |  |  |
|                             |                      |  |  |                            |  |  |
| 8.                          | Mortgage Lendin      | g  | <u>o en agai di Ciri. In Cirin di∰ta il ili</u> En   | ᅻ                          |  |  |
|                             | (Purpose(s)          | of corporation authorized in home state or   |  | وخوست الله (۱) ا           |  |  |
| 9.                          | . Name and street    | address of Florida registered agent: (P.   | O. Box NOT acceptable)   | ARETA ANTAS                |  |  |
|                             | Name:                | Business Filings Incorpora   | ed   | 29<br>RY 0                 |  |  |
| 0                           | office Address:      | 1201 Governors Square Blvd.  | , Ste 101  | F STA                      |  |  |
|                             |                      | Tallahassee  | , Florida <u>32301-2960</u>  |                            |  |  |
|                             |                      | (City)   | (Zip code)   | - <del></del>              |  |  |
|                             | O 10                 | 40   |  |                            |  |  |

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.

Business filings Incorporated

Mark Schiff, AVP

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. DIREC      | TORS   |  |                   |  |  |  |  |
|---------------|--|--|-------------------|--|--|--|--|
| Chairman: _   |  |  |                   |  |  |  |  |
| Address:      |  |  |                   |  |  |  |  |
|               | and the second s |  |                   |  |  |  |  |
| Vice Chairm   | an:  |  |                   |  |  |  |  |
| Address:      | an:  |  |                   |  |  |  |  |
| - · · <u></u> |  |  |                   |  |  |  |  |
| Director:     | John T. Gaiser   |  |                   |  |  |  |  |
| Address:      | 300 E. Esplanade Drive, Suite 1250   |  |                   |  |  |  |  |
|               | Oxnard, CA 93036   |  |                   |  |  |  |  |
| Director:     | Christopher Powell   |  |                   |  |  |  |  |
| Address:      | 300 E. Esplanade Drive, Suite 1250   |  |                   |  |  |  |  |
| <u> </u>      | Oxnard, CA 39036   |  |                   |  |  |  |  |
| B. OFFIC      | ERS  | •  |                   |  |  |  |  |
| President:    | John T. Gaiser   | au-d   |                   |  |  |  |  |
| Address:      | 300 E. Esplanade Drive, Suite 1250   | SEC<br>SEC   | -:1               |  |  |  |  |
|               | Oxnard, CA 93036   | AH AH<br>AH AH<br>AH AH<br>AH AH<br>AH AH<br>AH AH<br>AH AH<br>AH AH<br>AH<br>AH AH<br>AH<br>AH<br>AH<br>AH<br>AH<br>AH<br>AH<br>AH<br>AH<br>AH<br>AH<br>AH<br>A | Carines<br>Merces |  |  |  |  |
| Vice Preside  | nt: Christopher Powell   | RY S   |                   |  |  |  |  |
| Address:      | 300 E. Esplanade Drive, Suite 1250   | , FCS  | U_                |  |  |  |  |
|               | Oxnard, CA 93036   | 3점 일   |                   |  |  |  |  |
| Secretary: _  | Jeff Korber  |  |                   |  |  |  |  |
| Address:      | 300 E. Esplanade Drive, Suite 1250, Oxnard, CA 93036   |  |                   |  |  |  |  |
| Treasurer:    | Randy S. Miller  |  |                   |  |  |  |  |
| Address:      | 300 E. Esplanade Drive, Suite 1250, Oxnard, CA 93036   |  |                   |  |  |  |  |
|               |  |  |                   |  |  |  |  |
| NOTE: If      | necessary, you may attach an addendum to the application listing additional officers   | and/or director  | rs.               |  |  |  |  |
| 13.           | (Signature of Director or Officer listed in number 12 of the application)  |  |                   |  |  |  |  |
|               |  |  |                   |  |  |  |  |
| 14            | (Typed or printed name and capacity of person signing application)   |  |                   |  |  |  |  |

## State of California

Secretary of State

# CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, BRUCE McPHERSON, Secretary of State of the State of California, hereby certify:

That on the **4th day of December, 2001, QUALITY HOME LOANS** became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition business activity or practices of this corporation.

JUL 29 DAHASSEEN

this certificate and affix the Great Seal of the State of California this day of June 21, 2005.



( me Milleren

BRUCE McPHERSON Secretary of State