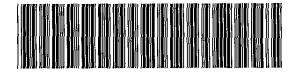
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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JUNES - 36960 JUNES - 4 2005

TRANSMITTAL LETTER

Division of Corporations								
SUBJECT: PREMIER MORTGAGE SOLUTION'S SERVICES, INC. (Name of corporation - must include suffix)								
(Name of corporation - must include suffix)								
Dear Sir or Madam:								
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.								
Please return all correspondence concerning this matter to the following:								
PEPPER REYNOLDS								
(Name of Person)								
DOEMIER MARTGAGE TOLOTOMS SERVICES TUK TO								
(Firm/Company)								
(Firm/Company) 9200 BASIL COURT SUITE 100 (Address) (Address) (City/State and Zip code)								
(Address)								
UPPER MARLBORO, MARYLAND 20174								
(City/State and Zip code)								
For further information concerning this matter, please call:								
Name of Person) at (301) 883-8810 (Area Code & Daytime Telephone Number)								
(Name of Person) (Area Code & Daytime Telephone Number)								
STREET ADDRESS: Registration Section MAILING ADDRESS: Registration Section								
Registration Section Registration Section Division of Corporations 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:								
S70.00 Filing Fee S78.75 Filing Fee & S78.75 Filing Fee & Certificate of Status Certified Copy S87.50 Filing Fee, Certified Copy								



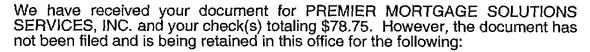
FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 4, 2005

PEPPER REYNOLDS
PREMIER MORTGAGE SOLUTIONS SERVICES, INC
9200 BASIL COURT SUITE 100
UPPER MARLBORO, MD 20774

SUBJECT: PREMIER MORTGAGE SOLUTIONS SERVICES, INC.

Ref. Number: W05000036960



A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Letter Number: 005A00050369

Joey Bryan Document Specialist TIMS NIG-8 PH 4: 23

BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO PRENIER MORTGAGE SOLVITONS SERVICES, INC (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") PREMIER MORTGAGE SOLUTIONS PREMIER MORTGAGE SERVICES
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (State or country under the law of which it is incorporated)

3. 25-1906906

(FEI number, if applicable) 4. January 03, 2005
(Date of incorporation) 6. CLPON REGISTRATION (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 9200 BASIL CT SUITE 100 UPPER MARLBORO MS 20774
(Principal office address) SAME AS ABOVE
(Current mailing address) (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) G. R. ROBBINS + ASSOCIATES. P. A. Name: 3375-C CAPITAL CIR. NE

TALLAHASSEE , Florida 32308
(City) (Zip code) Office Address: 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. DIRECT	ORS					
Chairman:		<u> </u>				
Address:		<u> </u>	, , , , , , , , , , , , , , , , , , ,	- 1.	<u> </u>	
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Vice Chairman	ı:		مد مرس این امارست در این	<u> </u>	<u> </u>	
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Address:						
Vice President						
Secretary:						
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Treasurer:			<u> </u>			·
Address:			· <u>· · · · · · · · · · · · · · · · · · </u>		<u> </u>	
NOTE: If no		In let	endum to the applic		g additional officers a	and/or directors.
14	JEA	CAEY G	me and capacity of	PRE	SIDENT	

STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT PREMIER MORTGAGE SOLUTIONS SERVICES, INC. IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS AUGUST 05, 2005.

Paul B. Anderson Charter Division FILEU
2005 AUG -8 PM 4: 23
2005 AUG -8 PM 4: 23



301 West Preston Street, Baltimore, Maryland 21201 Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice Fax (410) 333-7097