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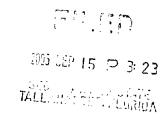
•	305 SEP 15 P 3: 23
(Re	questions Name) SSCE, FLORIDA
(A.J.	47
(Add	dress)
(Add	dress)
(City	y/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bus	siness Entity Name)
(Doc	cument Number)
Certified Copies	Certificates of Status
Special Instructions to F	-iling Officer:
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Office Use Only



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COVER LETTER

TO:	Registration Division of	Section Corporations
SUBJ	1	
SODJ	ECT:	ighland Mortgage Company Inc. (Name of corporation - must include suffix)
Dear S	ir or Madam	
"Certif		cation by Foreign Corporation for Authorization to Transact Business in Florida," ence," and check are submitted to register the above referenced foreign corporation to Florida.
Please	return all co	espondence concerning this matter to the following: Amy Edge
		tighland Mortgage Company Inc.
	1:	of Johnson Ferry Rd Ste 135
	ſ	larietta GA 30062
		(City/State and Zip code)
For fur	ther informa	on concerning this matter, please call:
- j	Any Ed	erson) at (770) 509 213 (Area Code & Daytime Telephone Number)
	`	
	Registration Division of Clifton But	Corporations Division of Corporations ling P.O. Box 6327 ive Center Circle Tallahassee, FL 32314
Enclos	ed is a check	for the following amount:
□ \$ 70	.00 Filing Fo	\$78.75 Filing Fee & S78.75 Filing Fee & S87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy Certified Copy

THE D

333 SEP 15 P 3: 23

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. Highlard Martagae Company Inc. (GA) (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"	_
"Inc.," "Co.," "Corp.," "Inc," "Co," or "Corp.")	
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida	<u></u>
•	
2. 1(M) 3. TN# 58-2447756 (State or country under the law of which it is incorporated) (FEI number, if applicable)	_
4. 3/9/1999 5 Perpetual (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual"	
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. <u>N/a</u>	
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
2 1501 Johnson Fernied Ste 135 Manotto CA 20062	
7. 1501 Johnson Ferny Rd Ste 135 Manetta GA 30062 (Principal office address)	_
(Principal office address) 1501 Johnson Ferry Rd Ste 135 Marretta GA 30062 (Current mailing address)	
(Current mailing address)	-
8. Martgage Broker (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	-
9. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)	
Name: 1.19wphy	
Name: George T. Murphy Office Address: 605 Ambergack Drive Panama City Beach, Florida 32408 (City) (Zip code)	
Panama City Reach 32408	
(City) (Zip code)	
10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the	e place
designated in this application, I hereby accept the appointment as registered agent and agree to act in this cap	acity. I
further agree to comply with the provisions of all statutes relative to the proper and complete performance of and I am familiar with and accept the obligations of my position as registered agent.	ny auues,
1	
Ja Tolley	
(Registered agent's signature)	
11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this applitude Department of State, by the Secretary of State or other official having custody of corporate records in the juri	cation to sdiction

under the law of which it is incorporated.

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

2635 SEP 15 ₱ 3:23

TALLAH SSENT LORIDA

A. DIRECTORS (Cuitarian Market Control of the Cont
Chairman:Address:
Audress.
Vice Chairman: M/A
Address:
Director: Ma
Address:
Director: n/a
Address:
B. OFFICERS President: Amy Edge Address: 4034 Defender Drive Roswell GA 30075 (home) 1501 Johnson Ferry Rd Sitte 135 Marketta GA 30062 (bysiness)
Vice President: Na
Address:
Secretary: N/A
Address:
Treasurer: M/A
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. (Signature of Director or Officer listed in number 12 of the application)
14. Amy Edge President (Typed or printed name and caracity of person signing application)

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 CONTROL NUMBER : K910784
DATE INC/AUTH/FILED: 03/09/1999
JURISDICTION : GEORGIA
PRINT DATE : 09/06/2005

FORM NUMBER : 21:

HIGHLAND MORTGAGE CO INC AMY EDGE 1501 JOHNSON FERRY RD STE 135 MARIETTA, GA 30075

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of The State of Georgia, do hereby certify under the seal of my office than de of the above print date

HIGHLAND, MORTCAGE COMPANY (INC. (GA)
A GEORGIA PROFIT EORFORATION

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official code of Georgia Annual registration provisions

Said entity was formed in the jurisdiction Effated above or was authorized to transact business in Georgia on the above alle, and has hot filed articles of dissolution, certificate of Cancellation or buy other similar document with the Office of the Setretary of State.

This certificate relates only to the legs existence of the above-named entity as of the print date above. It does not certify whether or not a notice of intent to dissolve an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of States.

This information is electronically transmitted, issued and certified in accordance with the Georgia Electronic Refords and Signatures Act and Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

20050906171916662

Cathy Cox Secretary of State