F0500000554/

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Codifical Continues of Challenger
Certified Copies Certificates of Status

Special Instructions to Filing Officer:
, DOS-43002
Dos INT

Office Use Only



100059122321

09/16/05--01049-012 **70.10



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

773 77 8**7** 77 63 **50**

September 15, 2005

STEVE BRAECKEL 347 N. LINDBERGH BLVD ST. LOUIS, MO 63141

SUBJECT: PARAMOUNT BOND & MORTGAGE CO., INC.

Ref. Number: W05000043002

We have received your document for PARAMOUNT BOND & MORTGAGE CO., INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

The document must have original signatures.

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) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 405A00057091



Paramount Mortgage Company

Since 1970

#新 9 %7 (213:50

Millian College

September 20, 2005

Agnes Lunt Document Specialist Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Ref. Number: W05000043002

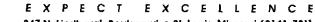
Enclosed are the current Certificate of Good Standing for the State of Missouri and the application with the original signature of our Registered Agent. Please let me know if there is anything else you need for this application.

Thank you

Stephen Braeckel







957



TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	%51P27 PD5			
SUBJECT: Paramount	Bon	d: Mortgage	Co., TAL	
(N	ame of corp	oration - must include si	uffix)	
Dear Sir or Madam:				
The enclosed "Application by Foreign "Certificate of Existence," and check transact business in Florida.				
Please return all correspondence conc	erning this n	natter to the following:		
SI	of Bo	ne of Person)		
	(Nar	ne of Person)		
Paramount	Bond (Fin	Mortgage a	o. Inc.	
	· unau	Address)		
St. 1.645	, Mo	Address) (03141		
	(City/S	tate and Zip code)		
	` •	. ,		
For further information concerning thi	s matter, ple	ase call:		
Steve Brackel (Name of Person)	_ at (_3	14 , 372-433	3	
(Name of Person)	(A	trea Code & Daytime To	elephone Number)	
STREET ADDRESS:			G ADDRESS:	
Registration Section Division of Corporations		Registration Section Division of Corporations		
409 E. Gaines St. P.O. Box 6327				
Tallahassee, FL 32399	Tallahassee, FL 32399 Tallahassee, FL 32314			
Enclosed is a check for the following a	mount:			
\$70.00 Filing Fee	ing Fee & e of Status	☐ \$78.75 Filing Fee Certified Copy	2 & 🗇 \$87.50 Filing Fee, Certificate of Status & Certified Copy	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

*					
	CE WITH SECTION 607.1503,				ED TO
1. PARAM	OUNT BOND 7. MORT	-6A GE CO.	INC.	25.5	?기 (P N: 51
(Enter name of	of corporation; must include "INCO	ORPORATED,"	"COMPANY," "CORPORA	TION,"	
"Inc.," "Co.,"	"Corp," "Inc," "Co," or "Corp.")			7:11	A STATE OF THE STA
(If name unav	ailable in Florida, enter alternate c	orporate name ad	opted for the purpose of tran	sacting business in	n Florida)
Λ.			_		
2. State or count	OUR I ry under the law of which it is inco	orporated)	43 -0951349 (FEI number, i	f applicable)	
	1		PERPETUAL		
·· 	ate of incorporation)	3. <u>_</u>	Duration: Year corp. will ce	ase to exist or "pe	rpetual")
	. ,	`			,
6	sacted business in Florida. If corp		ansacted business in Florida, 07.1502 and 817.155, F.S.)	insert "upon qual	ification.")
- 7117	1 .	_	-		
7. <u> </u>	N. LINDRERGH BL (Princ	inal office addres	-1015 1110 63141		
-	N. LINDBERGH BL			,	
	Curre	nt mailing address	s)		
	(-,		
8. MORT	BAGE LENDING				
	e(s) of corporation authorized in ho	ome state or coun	try to be carried out in state of	of Florida)	
9. Name and <u>st</u>	reet address of Florida regist	ered agent: (P.	O. Box or Mail Drop Box	NOT acceptable	e)
Name:	NRAI Services, Inc.		_		
Office Address	2731 Executive Park Drive, So	uito A			
Office Address.	2701 Exceditive Falk Brive, Of	uite 4			
	Weston		, Florida <u>33331</u>	-	
	(City)		(Zip code)		
10. Registered	agent's acceptance:				
	med as registered agent and to				
aesignatea in th further agree to	is application, I hereby accept comply with the provisions of	the appointmer all statutes rela	it as registered agent and tive to the proper and con	agree to act in t inlete nerforma	his capacity. I nce of my duties.
	ar with and accept the obligation			proce perjorniu.	oce of net amores,
	NRAI Services, Inc.)	١ ٨	-		
) L			
	By: lay ayor	WO			
	√(Registered agen	it'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. DIRECTO	DRS
Chairman:	
	<u> </u>
	207 P 12: 51
Vice Chairman	
Address:	···
Director:	
Address:	
Director:	
Address:	
	,
	
B. OFFICER	
	H. John Frant Jr.
Address:	347 N. Lindberch Blud.
	St. Lovis, Mo 183141
Vice President:	David Griege
	347 N. Lindbergh Blod.
<u></u> _	St. Lovis, Mo (03/41
Secretary:	V
Address:	
Treasurer:	
Address:	
NOTE: If nec	essary 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	(Typed or printed name and capacity of person signing application)

STATE OF MISSOURI



Robin Carnahan Secretary of State

CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

PARAMOUNT BOND & MORTGAGE CO., INC. 00140324

was created under the laws of this State on the 9th day of February, 1970, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 20th day of September, 2005

in Camahan

Secretary of State

Certification Number: 8042225-1 Reference:

Verify this certificate online at http://www.sos.mo.gov/businessentity/verification

