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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Citi First Mort (Name		vices Corporat: n - must include suffix)			
Dear Sir or Madam:					
The enclosed "Application by Foreign Co "Certificate of Existence," and check are stransact business in Florida.					
Please return all correspondence concerni	ng this matter	to the following:			
·	•	_	WOS-40	123	
Mic	hael H.				
	(Name of	Person)			
Citi First Mortgage Service	es Corpo	ration			
	(Firm/Co				
	·		۶	05	
6855 Jimmy Carter Blvd. St	e 2400				7
	(Addr	ess)	오 쥬	CT _	3 3 14 14 14 14 14 14 14 14 14 14 14 14 14 1
			AS I		C SERVICE
Norcross, GA 30071	(City/State)	ind Zip code)			
	(City/State a	ind Zip code)	<u> </u>	3 F	1
			<u> </u>	<u>\</u> \\ \forall \qquad \qq \qu	ر. از
For further information concerning this m	atter, please c	all:	Z	PM 12: 04	Market A
), A	. –	
	at (770	1200 0464			
Joseph Pyano (Name of Person)		<u>) 300-0464</u> Code & Daytime Teleph	none Number)		
(Name of Ferson)	(Alca (Jode & Daytime Telepi	ione rumoer,		
STREET ADDRESS:		MAILING A			
Registration Section		Registration !			
Division of Corporations		Division of C P.O. Box 632			
409 E. Gaines St. Tallahassee, FL 32399		Tallahassee,			
Talialiassee, FL 32399		rananassee,	1 2 32311		
Enclosed is a check for the following amo	ount:				
☑ \$70.00 Filing Fee ☐ \$78.75 Filing	g Fee & 🗆	\$78.75 Filing Fee &	□ \$87.50 Fili	-	
Certificate of	of Status	Certified Copy		of Status &	&
			Certified (Jopy	



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 24, 2005

MICHAEL H. KIM CITI FIRST MORTGAGE SERVICES CORPORATION 6855 JIMMY CARTER BLVD. STE. 2400 NORCROSS, GA 30071

SUBJECT: CITI FIRST MORTGAGE SERVICES CORPORATION

Ref. Number: W05000040123



We have received your document for CITI FIRST MORTGAGE SERVICES CORPORATION 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 brief description of the entity's nature of business must be included in the document.

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) 245-6958.

Lee Rivers Document Specialist

Letter Number: 105A00053719

under the law of which it is incorporated.

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

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.

	Sitt Sinch Western Services Comparison	
(Ent	Citi First Mortgage Services Corporation ter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," .," "Co.," "Corp," "Inc," "Co," or "Corp.")	
(If r	came unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	
	Seorgia USA 3. 20-2056405	
(Stat	to or country under the law of which it is incorporated) (FEI number, if applicable)	
4. 0	01-06-05	
··	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	
6.		
0	(Date first transacted business in Florida, if prior to registration)	
	(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
7. <u>6</u>	5855 Jimmy Carter Blvd. Ste 2400 Norcross, GA 30071	7
	(Principal office address)	1 -
6	5855 Jimmy Carter Blvd. Ste 2400 Norcross, GA 30071	-
	(Current mailing address)	뗗
		:
8	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	<i>)</i>
9. Na	me and street address of Florida registered agent: (P.O. Box NOT acceptable)	
	Name: <u>Business Filings Incorpora</u> ted	
Office	Address: 1203 Governors Square Blvd. Suite 101	
	Tallahassee , Florida 32301-2960 (City) (Zip code)	
Havin design furthe	legistered agent's acceptance: In been named as registered agent and to accept service of process for the above stated corporation at the plac nated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity er agree to comply with the provisions of all statutes relative to the proper and complete performance of my d am familiar with and accept the obligations of my position as registered agent.	1. I
	Mark Schiff, Avlor Business filings Megistered agent's signature) Incorporated	
11. A the De	attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application epartment of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction.	n to tion

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.

(If name unavailable	n Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2 Georgia US	3. 20-2056405
(State or country unde	3. 20-2056405 The law of which it is incorporated) (FEI number, if applicable)
4. 01-06-05	5. Perpetual
(Date of i	5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")
6.	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607 1501 & 607 1502 F.S. to determine penalty liability)
	(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 6855 Jimmy	Carter Blvd. Ste 2400 Norcross, GA 30071
	(Principal office address)
<u>. 6855 Jimmy</u>	Carter Blvd. Ste 2400 Norcross, GA 30071 (Current mailing address)
8. <u>TO ENG</u>	GE IN RESIDENTIAL MORTGAGE BROKER/BROKERING Corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street ac	dress of Florida registered agent: (P.O. Box NOT acceptable)
Name: _	Business Filings Incorporated
Office Address: _	1203 Governors Square Blvd. Suite 101
_	Tallahassee , Florida 32301-2960 (City) (Zip code)
designated in this ap further agree to com	's acceptance: s registered agent and to accept service of process for the above stated corporation at the place lication, I hereby accept the appointment as registered agent and agree to act in this capacity. ly with the provisions of all statutes relative to the proper and complete performance of my du h and accept the obligations of my position as registered agent.
	(Registered agent's signature)
	ficate of existence duly authenticated, not more than 90 days prior to delivery of this application

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. DIRECTORS Chairman: Michael H. Kim Addres6:360 Views Trace Drive Norcross, GA 30092 Vice Chairman: Address: Director: Address: Director: **B. OFFICERS** President: Michael H. Kim Address: _____6360 Views Trace Drive Norcross, GA 30092 Vice President: Address: _____ Secretary: Address: ____ __ Treasurer: Address: ______ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) President

(Typed or printed name and capacity of person signing application)

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 DOCKET NUMBER : 050060482

CONTROL NUMBER : 0500793

DATE INC/AUTH/FILED: 01/06/2005

JURISDICTION : GEORGIA

PRINT DATE : 01/06/2005

FORM NUMBER : 211

CITI FIRST MORTGAGE SERVICES CORPORATION

6360 VIEWS TRACE DRIVE NORCROSS, GA 30092

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia hereby certify under the seal of my office that

CITI FIRST MORTGAGE SERVICES CORPORATION A DOMESTIC PROFIT CORPORATION

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the abovenamed entity as of the date issued. 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 State.

This certificate is issued pursuant to 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.



July Cop

Cathy Cox Secretary of State