

FD50000 5938

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



PICK-UP



WAIT



MAIL

(Business Entity Name)

(Document Number)

Certified Copies

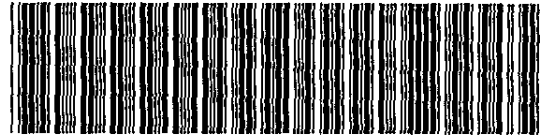


Certificates of Status



Special Instructions to Filing Officer:

Office Use Only



500066183885

02/20/06--01031--008 +\$52.50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 FEB 20 AM 9:59

FILED

MC

Allison gave me
authorization to make
necessary changes to her DSC.
Sps. 3/1/04

Sally 2-20-06

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SOUTHERN STATES FINANCIAL SERVICES
(Name of Corporation)

DOCUMENT NUMBER: FD5000005938

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

William Grand
(Name of Contact Person)

14190 POWERS FERRY RD. NW
(Firm/Company)

Suite 180
(Address)

Atlanta, GA 30339
(City/State and Zip Code)

For further information concerning this matter, please call:

AMISON ASSELIN at (770) 908-7000
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$35.00 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☒ \$52.50 Filing Fee,
Certificate of Status &
Certified Copy
(Additional copy is
enclosed)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO
APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

FILED
06 FEB 20 AM 9:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. FOS060005938
(Document number of corporation (if known))
1. SOUTHERN STATES FINANCIAL Services, Inc.
(Name of corporation as it appears on the records of the Department of State)
2. GEORGIA
(Incorporated under laws of)
3. 10-12-2005
(Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? January 9, 2006

5. ASSENT Mortgage Corporation
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

William Grand
(Typed or printed name of person signing)

President
(Title of person signing)

Secretary of State
Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

DOCKET NUMBER : 060241629
CONTROL NUMBER : 0455446
EFFECTIVE DATE : 01/09/2006
REFERENCE : 0011
PRINT DATE : 01/24/2006
FORM NUMBER : 611

STEVEN J. KAULENBERG, ESQ.
STE 440, 6000 LAKE FORREST DRIVE
ATLANTA, GA 30328

CERTIFICATE OF NAME CHANGE AMENDMENT

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

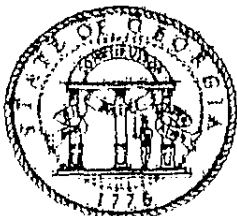
SOUTHERN STATES FINANCIAL SERVICES, INC.
A DOMESTIC PROFIT CORPORATION

has filed articles of amendment in the Office of the Secretary of State changing its name to

AASENT MORTGAGE CORPORATION

and has paid the required fees as provided by Title 14 of the Official Code of Georgia Annotated. Attached hereto is a true and correct copy of said articles of amendment.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on the date set forth above.



Cathy Cox

Cathy Cox
Secretary of State

Secretary of State

Corporations Division

315 West Tower

#2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

CONTROL NUMBER : 0455446
DATE INC/AUTH/FILED: 09/13/2004
JURISDICTION : GEORGIA
PRINT DATE : 01/25/2006
FORM NUMBER : 211

AASENT MORTGAGE CORPORATION
WILLIAM GRAND
6190 POWERS FERRY ROAD, NW
SUITE 180
ATLANTA, GA 30339

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that as of the above print date

AASENT MORTGAGE CORPORATION
A GEORGIA PROFIT CORPORATION

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated.

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date 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 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 State.

This information is electronically transmitted, issued and certified in accordance with the Georgia Electronic Records 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.

20060125165114889



Cathy Cox

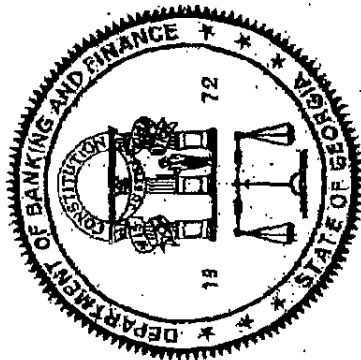
Cathy Cox
Secretary of State

Georgia Department of Banking and Finance

ANNUAL MORTGAGE LENDER LICENSE No. 19901

Under the provisions of Chapter 13, Official Code of Georgia Annotated, hereby granted

Aasent Mortgage Corporation



THIS LICENSE IS NON-TRANSFERABLE and IS VALID UNTIL JUNE 30, 2006

Unless REVOKED, WITHDRAWN, SUSPENDED or EXPIRES prior to that date.

This license is subject to Cancellation, Revocation, Withdrawal, Suspension or Expiration. To verify validity of license, please call the Georgia Department of Banking and Finance Atlanta, Georgia at 770-986-1269 or access the Department's Web site at <http://www.state.ga.us/dbf/mortgage.html>.

February 16, 2006

Date

Deputy Commissioner, Mortgage Division

[Signature]