F0500006162

(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.





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Fe/20/05--01018 907 ++70.00

SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT:	oration - must include suffix)		
Dear Sir or Madam:			
	n for Authorization to Transact Business in Florida," It to register the above referenced foreign corporation to		
Please return all correspondence concerning this m	natter to the following:		
KeithHouell			
KeithHouell (Nam	ne of Person)		
North Georgia Mortge			
102 Coluny Park DR	! Suite 100		
Cumning GA (City/s	Address)		
Cymning GA	30 <i>0</i> 40		
(City/S	tate and Zip code)		
For further information concerning this matter, ple	ase call:		
Keiththouell at (6	78) S13-011 7 Area Code & Daytime Telephone Number)		
(Name of Person) (A	Area Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations	Division of Corporations P.O. Box 6327		
Clifton Building 2661 Executive Center Circle	Tallahassee, FL 32314		
Tallahassee, FL 32301			
Enclosed is a check for the following amount:			
\$70.00 Filing Fee & Certificate of Status	S78.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy		

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.

	orporation; must include "INCORPORATED," "COMPANY," "CORPORATION," orp," "Inc," "Co," or "Corp.")	
	1/A	
(If name unavaila	ble in Florida, enter alternate corporate name adopted for the purpose of transacting busin	ness in Florida)
2. Georgi	ander the law of which it is incorporated) 3. S8-25(9700) (FEI number, if applicable)	
4	of incorporation) 5. Perpetal (Duration: Year corp. will cease to exist of	
(Date	of incorporation) (Duration: Year corp. will cease to exist of	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)	
7. 102 (Colony Park DR Suite 100 Cynning, CA (Principal office address)	30040
	· · · · · · · · · · · · · · · · · · ·	
102 (Olony Park DR Suite 100 Cynning, GA (Current mailing address)	30040
	(Current mailing address)	
8 ~	10 rtanes	
(Purpose(s)	of corporation authorized in home state or country to be carried out in state of Florida)	
	address of Florida registered agent: (P.O. Box NOT acceptable)	SECRET IVISION
Name:	J.L. Houell - Pirate Cove Villas	1 20 FE
Office Address:	23001 Front Beach Rd uniting	PA CORPO
	Panamacin Beach, Florida 32413 (City) (Zip code)	STATE DRATION
	(City) (Zip code)	SHO SHO
10. Registered ag		
Having been name designated in this l	d as registered agent and to accept service of process for the above stated corpo application, I hereby accept the appointment as registered agent and agree to ac	ration at the place
further agree to co	mply with the provisions of all statutes relative to the proper and complete perfo	
and I am familiar	with and accept the obligations of my position as registered agent.	
	$(\setminus I) / (\setminus I) $	
	() Curl	

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	PRS		
Chairman:	KeithHourl		
Address:	102 Colony Park DR Suite 100		
	Cymning, GA 30040		
	114		
	NA		
	71 A		
Director:	01.		
Address:	01.		
	N/4		
Director:	Na		
Address:	014		
	1/A		
B. OFFICERS			
	KeithHouel		
	102 Colony Park DR Suite 100		
	Cunning GA 30040	- 5 0	SECI
Vice President:	ΛΙΑ	0¢T 2	2 M 2 M 2 M
Address:		— ⊚ •	2550 2550
	NA	<i>∴</i>	OR ATA
Secretary:	KeithHouel	2	
	102 Colony Park DR Suite 100 Cynning Cof 3		
	·		
Address:	oz Colony Park DR Suite 100 Cumning, GA 3	シロイこ)
NOTE: If nece	ssary, you may attach an addendum to the application listing additional officers and/or di	rectors.	
13	(Signature of Director or Office listed in some by 12 of the first of the signature of the		
L	(Signature of Director or Officer listed in number 12 of the application)		
14	(Typed or printed name and capacity of person signing application)		

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

CONTROL NUMBER : 0036629
DATE INC/AUTH/FILED: 08/09/2000
JURISDICTION : GEORGIA
PRINT DATE : 10/19/2005
FORM NUMBER : 211

NORTH GA MORTGAGE FINANCIAL, INC. KEITH HOWELL 102 COLONY PARK DR. SUITE 100 CUMMING, GA 30040

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

NORTH GEORGIA MORTGAGE FINANCIAL, INC. 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.

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Cathy Cox Secretary of State