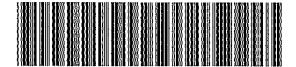
F05000006376

	(Reques	tor's Name	
	(Addres	s)	
	(Addres	s)	
	(City/Sta	ite/Zip/Phor	ne #)
PICK-U	P [] WAIT	MAIL
	(Busine:	ss Entity Na	me)
	(Docum	ent Number)
Certified Copies	•	Certificate	s of Status
Special Instruction	s to Filing	g Officer:	
me ailability			
cument aminer	Duu	fice U se O	
odater	Luc	nce ose o	шу
odater erifyer	vçc		
cknowledgement	DCC		
/ P Verifver	DLC		



900060907179

田利斯 细胞的细胞 鄉海.馬

SECKETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Civic Mortgage Group, Inc.
(Name of corporation - must include suffix)
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Bruce K. Weltin
(Name of Person)
Civic Mortgage Group, Inc.
(Firm/Company)
127 Dorrance Street, Penthouse Suite
(Address)
Providence, RI 02903
(City/State and Zip code)
For further information concerning this matter, please call:
Debra Skillin at (401) 278-4040
Debra Skillin (Name of Person) (Area Code & Daytime Telephone Number 2007 (Area Code & Daytime Telephone Nu
(Name of Person) (Area Code & Daytime Telephone Number 35 STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 (Area Code & Daytime Telephone Number 35 Registration Section Registration Section Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:
☐ \$70.00 Filing Fee ☑ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certificate of Status 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.

1 Civic Mortgage	Group, Inc.
(Enter name of co	orporation; must include "INCORPORATED," "COMPANY," "CORPORATION," orp," "Inc," "Co," or "Corp.")
(If name unavaila	able in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Rhode Island, I	USA 3. 05-0514447 (FEI number, if applicable)
(State or country	under the law of which it is incorporated) (FEI number, if applicable)
4. November 22,	2000 5. perpetual
(Date	of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. None	
	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7, 127 Dorrance S	Street, Penthouse Suite, Providence, RI 02903
	(Principal office address)
Same as above	
	(Current mailing address)
8. Mortgage Brok	er Sanices
	s) of corporation authorized in home state or country to be carried out in state of Florida)
, - ,	
9. Name and sires	et address of Florida registered agent: (P.O. Box NOT acceptable)
Name:	CT Corporation System
Office Address:	1220 South Pine Island Road ARR O
	Plantatton , Florida 33324
	(City) (Zip code) SSN ω
Having been nam designated in this further agree to c	gent's acceptance: ned as registered agent and to accept service of process for the above stated corporation at the places application, I hereby accept the appointment as registered agent and agree to act in this capacity. comply with the provisions of all statutes relative to the proper and complete performance of my duty with and accept the obligations of my position as registered agent.
_	Gerger Berger

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. DIRECTORS			
Chairman: None required by law.			
Address:			
Vice Chairman:			
	<u> </u>		
Address:			
Director:			
Address:			
Director:			
Address:			
B. OFFICERS			
President: Bruce K. Weltin			
Address: Civice Mortgage Group, Inc.			
127 Dorrance Street, Penthouse Suite, Providence	lence. Rt 02093		
Bruce K Weltin			
Address: Same as above.			
Address: Odifie as above.	EC 1995		
D			
Secretary: Bruce K. Weltin	<u> </u>		
Address: Same as above.			
Treasurer: Bruce K. Weltin			
Address: Same as above.	<u> </u>		
NOTE IS			
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)			
Bruce K. Weltin, President			
(Typed or printed name and capacity of person signing application)			



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Matthew A. Brown Secretary of State

The Office of the Secretary of State of the State of Rhode Island and Providence Plantations, HEREBY CERTIFIES, that

Civic Mortgage Group, Inc.

a Rhode Island corporation, filed articles of incorporation in this office on the 22^{nd} day of November 2000; and

IT IS FURTHER CERTIFIED that as of this date said corporation is duly organized and existing under and by virtue of the laws of the State of Rhode Island and is in good standing according to the records of this office.

SIGNED AND SEALED this eighteenth day of October, A.D. 2008 (2)

Secretary of State

um e Cal

