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## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** THE CAMBRIDGE 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:

TRACY NEWMAN

(Name of Person)

MYCORPORATION.COM

(Firm/Company)

26520 AGOURA RD.

(Address)

CALABASAS, CALIFORNIA 91302

(City/State and Zip code)

For further information concerning this matter, please call:

Tracy Newman-MyCorporation.com at ( 818 ) 879-9079 ext 60134

(Name of Person)

(Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☒ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, 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. THE CAMBRIDGE MORTGAGE GROUP, INC.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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

**2. MASSACHUSETTS**

(State or country under the law of which it is incorporated)

**3. 04-3300909**

(FEI number, if applicable)

**4. FEBRUARY 9, 1996**

(Date of incorporation)

**5. Perpetual**

(Duration: Year corp. will cease to exist or "perpetual")

**6. The date the corporation will first begin business in the state of Florida is upon filing.**

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

**7. 177 MILK ST., BOSTON, MASSACHUSETTS 02109**

(Principal office address)

**177 MILK ST., BOSTON, MASSACHUSETTS 02109**

(Current mailing address)

**8. MORTGAGE LENDING**

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

**9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)**

Name: **NRAI Services, Inc.**

Office Address: **2731 Executive Park Drive., Suite 4**


**Weston**, Florida **33331**

(City)

(Zip code)

**10. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

 **ASST SEC**

(Registered agent's signature) LISA BEGG, ASST. SEC, NRAI SERVICES, INC.

**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:**

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**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: JOHN A. BATTAGLIA

Address: 21 DEL PRETE DRIVE

HINGAHAM, MASSACHUSETTS 02043

Director: MARY F. MARENGI

Address: 52 HAY ST.

NEWBURY, MASSACHUSETTS 01951

**B. OFFICERS**

President: JOHN A. BATTAGLIA

Address: 21 DEL PRETE DRIVE

HINGAHAM, MASSACHUSETTS 02043

Vice President: MARY F. MARENGI

Address: 52 HAY ST.

NEWBURY, MASSACHUSETTS 01951


Secretary: JOHN A. BATTAGLIA

Address: 21 DEL PRETE DRIVE, HINGAHAM, MASSACHUSETTS 02043

Treasurer: JOHN A. BATTAGLIA

Address: 21 DEL PRETE DRIVE, HINGAHAM, MASSACHUSETTS 02043

**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)

14. JOHN A. BATTAGLIA, PRESIDENT  
(Typed or printed name and capacity of person signing application)



William Francis Galvin  
Secretary of the  
Commonwealth

# *The Commonwealth of Massachusetts*

*Secretary of the Commonwealth*

*State House, Boston, Massachusetts 02133*

March 17, 2006

TO WHOM IT MAY CONCERN:

I hereby certify that according to the records of this office,

**THE CAMBRIDGE MORTGAGE GROUP, INC.**

is a domestic corporation organized on **February 9, 1996**, under the General Laws of the Commonwealth of Massachusetts.

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.

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TALLAHASSEE, FLORIDA



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

*William Francis Galvin*

Secretary of the Commonwealth