F0600000 2078

(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



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Regulatory Counsel Group, Inc.

www.regulatorycounsel.com

Mortgage Licensing & Compliance Advisors

March 30, 2006

Department of State Division of Corporations 2661 Executive Center Circle West Tallahassee, FL 32301 (850) 245-6051

RE: National Mortgage, Inc.

To Whom It May Concern:

This provides you with information on behalf of <u>National Mortgage</u>, <u>Inc.</u> to establish them as a foreign company to transact business in your State doing business as <u>NM Mortgage Leads</u>. As their Agent, Regulatory Counsel Group, Inc. has enclosed the following:

- 1. A check in the amount of \$78.75 (\$70.00 filing fee and \$8.75 for Certificate of Status)
- 2. Two (2) original Applications for Authorization (signed)
- 3. Certificate of Good Standing (original)
- 4. A check in the amount of \$50.00 (filing fee)
- 5. Two (2) original Applications for Fictitious Name (signed)
- 6. A self-addressed, stamped envelope to send one approved, original back to RCG's attention.

Please send all correspondence to:

Regulatory Counsel Group, Inc.

295 West Crossville Road

Suite 530

Roswell, GA 30075

Thank you for your cooperation. If you have any questions, please contact mexia phone at (770) 992-7779, via email at <u>llesser@rcgteam.com</u>, or via fax at (770) 992-0779.

Sincerely,

Lisa A. Lesser

Assistant Account Executive

Enclosures

COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: National Mortgage, Inc.			
(Name of corporation - must include suffix)			
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation for Authorization to Transact Business "Certificate of Existence," and check are submitted to register the above referenced foreign transact business in Florida.			
Please return all correspondence concerning this matter to the following:			
Lisa A. Lesser			
(Name of Person)			
Regulatory Counsel Group, Inc.			
(Firm/Company)	-		
295 West Crossville Road, Suite 530	===		
(Address)		90	
Roswell, GA 30075	AH.	06 MAR	-1
(City/State and Zip code)	SS	ယ	
	<u></u>	-0	
For further information concerning this matter, please call:	[];	=	
Line A London 770 000 7770	RIDA	PM 1: 45	
Lisa A. Lesser at (770) 992-7779 (Name of Person) (Area Code & Daytime Telephone Number			
(Name of Person) (Area Code & Daytime Telephone Number	r)		
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:			
Certificate of Status Certified Copy Certi	Filing Fe ficate of S fied Copy	Status &	&

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. Na	onal Mortgage, Inc.	
	me of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Co.," "Corp," "Inc," "Co," or "Corp.")	
NN	Mortgage Leads , Inc.	
(If na	unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	
_{2.} De	ware <u>3. 52-2220677</u>	
(State	country under the law of which it is incorporated) (FEI number, if applicable)	
4. 01	1/2005 _{5.} Perpetual	
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	
6. Up	Qualification	
	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
_{7.} 80	road Street, Suite 1303, New York, NY 10004	
· ·	(Principal office address)	
80	road Street, Suite 1303, New York, NY 10004	
	(Current mailing address)	
	FO 6 Part of 1	
8. <u>M</u> C	gage Lead Provider	3 §
	urpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	
9. Nam		7
	old <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable) NRAI Services, Inc.	-
Office 1	2/21 Evacutiva Dark Driva Stuta / " 9	
	Westin, 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.

(Registered agent's signature) Scott Scher, Assistant Secretary

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.

Chairman: N/A	<u>, , , , , , , , , , , , , , , , , , , </u>		·_	
Address:				<u> </u>
	<u></u>	<u> </u>	<u>:</u>	
Vice Chairman: N/A		<u>, , , , , , , , , , , , , , , , , , , </u>		
Address:				
	. <u>, </u>	··		1
Director:		<u> </u>	<u></u>	
Address:				<u></u>
Director:				
Address:				
			:	
B. OFFICERS				
President: Sharon Asher			<u> </u>	_6
Address: 80 Broad Street, Suite 1303, New York, NY 100	04		<u> </u>	T TI
			SSE 	<u>ω</u> =
W/A				P (46
Vice President: N/A	<u></u>	<u></u>		
Address:	.		一景二	-5
Secretary: N/A				
Address:				
Treasurer: N/A		······		
Address:	_ <u>, </u>	<u>:</u>		
NOTE: If necessary, you may attach an addendum to the application	ation listina addi	tional officers a	nd/or direc	otore
	•		nwor and	
(Signature of Director or Officer listed in number	r 12 of the applic	cation)	<u></u>	
Sharan Ashar CEO/President	apprin	······································		

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



PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NATIONAL MORTGAGE INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-THIRD DAY OF MARCH, A.D. 2006.



Darriet Smith Mindson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4615486

DATE: 03-23-06

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