

F06000003217

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

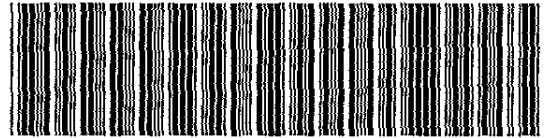
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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06 MAY -3 PM 4:04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. WHITE MAY -3 2006

## COVER LETTER

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

**SUBJECT:** Superior Mortgage Services

(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:

Kristin Neuman

(Name of Person)

Superior Mortgage Services

(Firm/Company)

11000 Prairie Lakes Drive Suite 250

(Address)

Eden Prairie MN 55344

(City/State and Zip code)

For further information concerning this matter, please call:

Kristin Neuman

(Name of Person)

at ( 952 ) 9060025

(Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

New Filing Section

Division of Corporations

Chilton Building

2651 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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 25, 2006

**KRISTIN NEUMAN**  
**SUPERIOR MORTGAGE SERVICES**  
11000 PRAIRIE LAKES DRIVE SUITE 250  
EDEN PRAIRIE, MN 55344

**SUBJECT: SUPERIOR MORTGAGE SERVICES**  
**Ref. Number: W06000019350**

We have received your document for SUPERIOR MORTGAGE SERVICES and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please select another name and add a suffix.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6933.

**Dale White**  
**Document Specialist**

Letter Number: 906A00028345

RECEIVED  
06 MAY -3 PM 3:05

# 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. Superior Mortgage, Inc.

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

## Superior Mortgage Resources, Inc.

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

## 2. Delaware

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

## 3. 541945139

(FEI number, if applicable)

## 4. May 14, 1999

(Date of incorporation)

## 5. perpetual

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

## 6. n/a

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

## 7. n/a

(Principal office address)

## 11000 Prairie Lakes Drive Suite 250 Eden Prairie, MN 55344

(Current mailing address)

## 8. Mortgage Broker and Lender (Correspondent Lender)

(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: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee

(City)

Florida 32301

(Zip code)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## 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)

Sarah K. Drake  
as its agent

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: \_\_\_\_\_

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

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

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

Director: \_\_\_\_\_

Gregg Smith

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

8205 Maryland Road

Bloomington, MN 55438

Director: \_\_\_\_\_

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

**B. OFFICERS**

President: \_\_\_\_\_

Scott Neuman

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

8435 Mission Hills Lane

Chanhassen, MN 55317

Vice President: \_\_\_\_\_

Kristin Neuman

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

8435 Mission Hills Lane

Chanhassen, MN 55317

Secretary: \_\_\_\_\_

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

Treasurer: \_\_\_\_\_

Todd Essig

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

1820 Fairfield Road South Minnetonka, MN 55305

**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. \_\_\_\_\_

Kristin Neuman, Vice-President

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# Delaware

PAGE 1

*The First State*

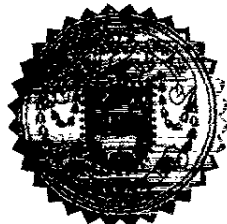
I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SUPERIOR MORTGAGE INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SUPERIOR MORTGAGE INC." WAS INCORPORATED ON THE FOURTEENTH DAY OF MAY, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

FILED  
06 MAY - 3 PM 4: 04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



3041274 8300

060372122

*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4685356

DATE: 04-21-06