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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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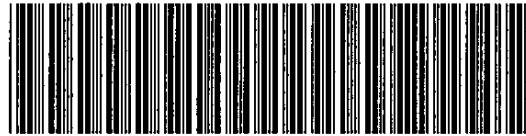
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. WHITE JUN 27 2006



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 19, 2006

KIM DAVID NORLING
VISTA MORTGAGE, INC
217 N 2ND STREET
STILLWATER, MN 55082

SUBJECT: VISTA MORTGAGE OF MN
Ref. Number: W06000027756

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

Please complete the entire application by filling out the second page of the application.

Please enter a suffix at the end of the alternate name you have selected.

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: 906A00041125

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: VISTA MORTGAGE, INCORPORATED
(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:

KIM DAVID NORLING
(Name of Person)

VISTA MORTGAGE, INC
(Firm/Company)

217 N 2ND STREET
(Address)

STILLWATER MN 55082
(City/State and Zip code)

For further information concerning this matter, please call:

KIM DAVID NORLING at (612) 839-3947
(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. VISTA MORTGAGE INC
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

VISTA MORTGAGE OF MN INCORPORATED
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. MINNESOTA 3. 41-2017180
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 9/10/2001 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist 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. 217 N 2nd STREET, STILLWATER, MN 55082
(Principal office address)

SAME
(Current mailing address)

8. MORTGAGE BROKER BUSINESS
(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: Agents and Corporations, Inc.

Office Address: 773 4th Avenue, Suite E

Naples, Florida 34102
(City) (Zip code)

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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.

Dave Norling

(Registered agent's signature)

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.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: KIM DAVID NORLING

Address: 300 OAK KNOLL DRIVE

MARINE ON ST. CROIX MN 55047

Vice Chairman: PATRICIA MONTGOMERY

Address: 300 OAK KNOLL DRIVE

MARINE ON ST. CROIX MN 55047

Director: KIM DAVID NORLING

Address: 300 OAK KNOLL DRIVE

MARINE ON ST. CROIX MN 55047

Director: PATRICIA MONTGOMERY

Address: 300 OAK KNOLL DRIVE

MARINE ON ST. CROIX MN

B. OFFICERS

President: KIM DAVID NORLING

Address: 300 OAK KNOLL DRIVE

MARINE ON ST. CROIX MN 55047

Vice President: BRUCE GOETSCH

Address: 3982 KINDRED WAY

LAKE ELMO MN 55042

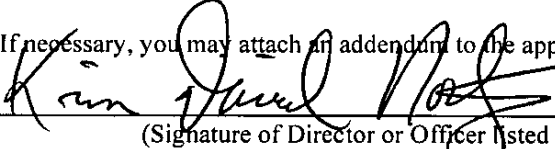
Secretary: PATRICIA MONTGOMERY

Address: 300 OAK KNOLL DRIVE

Treasurer: _____

Address: _____

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. KIM DAVID NORLING
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

State of Minnesota

SECRETARY OF STATE

Certificate of Good Standing

I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

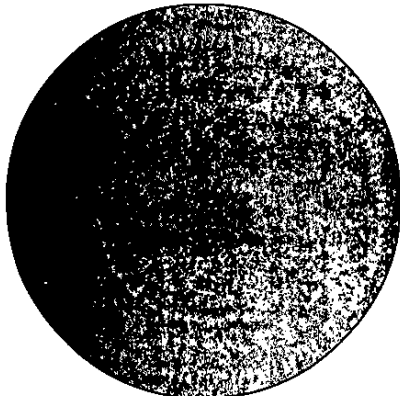
Name: VISTA MORTGAGE, INC.

Date Formed: 01/14/2000

Chapter Governed By: 302A

This certificate has been issued on 06/15/06.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Mary Kiffmeyer
Secretary of State.