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| (Re | equestor's Name) | | | |
| (Address) | | | | |
| (Ac | ldress) | | | |
| (* ** | .u. 000) | | | |
| (Ci | ty/State/Zip/Phon | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | isiness Entity Nai | me) | | |
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| Certified Copies | _ Certificate: | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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OG AUG IL PH 3: OL SECRETARY OF STATE

D.WHITE AUG 14 2006

COVER LETTER

| TO: | Registration Section Division of Corporations | | | |
|---------------|---|------------|--|--|
| SUBJ | TECT: Stonehaven Financial, Inc |). | | |
| | | | must include suffix) | |
| Dear S | Sir or Madam: | | | |
| "Certi | nclosed "Application by Foreign Corporation ficate of Existence," and check are submitted to business in Florida. | | | |
| Please | return all correspondence concerning this m | natter to | the following: | |
| Rob | oert J. Eckman | | | |
| | (Nar | me of Pe | rson) | |
| Sto | nehaven Financial, Inc. | | · · · · · · · · · · · · · · · · · · · | |
| | (Fire | m/Comp | any) | |
| 144 | 05 Walters Road, Suite 530 | | | |
| | (| (Address | 3) | |
| Ηοι | uston, Texas_77014 | | | |
| | (City/S | State and | Zip code) | |
| For fu | rther information concerning this matter, ple | ease call: | | |
| Rob | ert J. Eckman at (2 | 81) | 580-6200 ex | t 103 |
| | | | le & Daytime Teleph | |
| | | | | |
| | STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | | MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I | Section orporations 7 |
| Enclos | ed is a check for the following amount: | | | |
| ☑ \$70 | 0.00 Filing Fee \$\(\text{Certificate of Status}\) | | 78.75 Filing Fee & ertified Copy | \$87.50 Filing Fee, Certificate of Status & Certified Copy |



August 11, 2006

ROBERT J. ECKMAN 14405 WALTERS ROAD, SUITE 530 HOUSTON, TX 77014

SUBJECT: STONEHAVEN FINANCIAL INC

Ref. Number: W06000035556

We have received your document for STONEHAVEN FINANCIAL INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Letter Number: 606A00050018

Dale White Document Specialist

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. STONEHAVE | EN FINANCIAL, INC. | | |
|--|---|---|------------------|
| (Enter name of | corporation; must include "INCORPORATED," Corp," "Inc," "Co," or "Corp.") | "COMPANY," "CORPORATION," | |
| | | | |
| STONE | HAVEN FINANCIAL IN | STONEHAUEN MORT | GALLE |
| (If name unavai | lable in Florida, enter alternate corporate name a | adepted for the purpose of transacting business in Flor | ida) + M |
| 2. TAXA | S 3. | 20-346736 (FEI number, if applicable) | |
| (State or country | under the law of which it is incorporated) | (FEI number, if applicable) | |
| 4. 10-2 | 6-05 | Perferrac | |
| | e of incorporation) | (Duration: Year corp. will cease to exist or "perpetua | i l") |
| 6. N/A | | | |
| | (Date first transacted business in | Florida, if prior to registration) | |
| 1.164. | (SEE SECTIONS 607.1501 & 607.150 | | |
| 7. 1990 | s walters kb st | e 530, HousmuTX 530, HousmuTX | 77014 |
| 100 | (Principal office addre | -2 - +7 | 5 0 |
| 17705 | Wallas KI STE | 330, F/8USIIN IX | 17019 |
| _ | (Current mailing addre | | |
| 8. Resi | DOTAL MORTHAGE LE | ~ P 10 T | |
| (Purpose(| s) of corporation authorized in home state or cou | untry to be carried out in state of Florida) | _ |
|). Name and stree | et address of Florida registered agent: (P.O. | Box NOT acceptable) |)6 AU |
| Name: | C T Corporation System | | <u>E</u> = |
| Office Address: | 1200 South Pine Island Road | — SSEF, OF | LED LPM |
| | Plantation | , Florida 33324 | ب |
| | (City) | (Zip code) | Q |
| O Domintowed on | | DE A | 1 - |
| | ent's acceptance: ed as registered agent and to accept service | of process for the above stated corporation at t | he place |
| lesignated in this | application, I hereby accept the appointme | nt as registered agent and agree to act in this ca | pacity. I |
| urther agree to co nd I am familiar | omply with the provisions of all statutes rele with and accept the obligations of my posit | ative to the proper and complete performance of tion as registered agent | my duties, |
| y | | | |
| ٠ | C T Corporation | | |
| By | Howard & Vol | Howard L. Volz, Ass't Secy | |
| | (Registered agent 9 signature) | . 9 | |

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.

| A. DIRECTORS | FILED |
|---|---|
| Chairman: L | 05 AUG 14 PH 3: 04 |
| Address: | SECRETARY OF STATE |
| | TALLAHASSEE, FLORIDA |
| Vice Chairman: | |
| Address: | |
| | |
| Director: | |
| Address: | |
| Director: | |
| | |
| Address: | |
| B. OFFICERS | |
| President: Robert J. Eckman | |
| Address: 14405 Walters Road, Ste 530 | |
| Houston Texas 77014 | |
| Mark lames Hammond Ir | |
| Address: 14405 Walters Road, Ste 530 | |
| Houston, Texas 77014 | |
| Secretary: Elaine Geller | |
| Address: 14405 Walters Road, Ste 530, Housto | on, Texas 77014 |
| Treasurer: | |
| Address: | • |
| | |
| NOTE: If necessary, you may attach an addendum to the application | n listing additional officers and/or directors. |
| 13. (Signature of Director or Officer listed in num | her 12 of the application) |
| 14. WSey TECKM | our is or the approximation; |
| (Typed or printed name and capacity of pers | on signing application) |

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Roger Williams Secretary of State

Office of the Secretary of State

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Incorporation for STONEHAVEN FINANCIAL, INC. (filing number: 800563048), a Domestic For-Profit Corporation, was filed in this office on October 26, 2005.

It is further certified that the entity status in Texas is in existence.

OG AUG 14 PH 3: 04
SLONE MAY OF STATE
SLONE MAY SEFF FLORIDA

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on August 11, 2006.



ger Maining

Roger Williams Secretary of State