F06000006472

(Requestor's Name)
(Address)
(Address)
·
(City/State/Zip/Phone #)
(City/State/Zip/Filotte #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
,
·

Office Use Only



700077759957

07/20/06--01029--002 **87.50

2000 OCT 11 P IZ: 05
SECRETARY OF STATE
AND ASSESSED A

Jan Salas



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 26, 2006

SHAWNA M. HART 8140 WARD PKWY. KANSAS, MO 64114

SUBJECT: NOVASTAR REAL ESTATE HOLDINGS, INC.

Ref. Number: W06000033120



We have received your document for NOVASTAR REAL ESTATE HOLDINGS, INC. 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 document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return the original and one copy of 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) 245-6995.

Wanda Cunningham Document Specialist New Filing Section

Letter Number: 806A00047423

TRANSMITTAL LETTER

	• •		, 4
	TRANSMIT	TAL LETTER	
TO: Registration S Division of Co			
SUBJECT: NovaSta	r Real Estate Holdings, Inc.		
		ation - must include suffix)	64
Dear Sir or Madam:	, .	,	
The enclosed "Applica" (Certificate of Existen transact business in Flo	ntion by Foreign Corporation ce," and check are submitted orida.	for Authorization to Transa to register the above referen	ct Business in Florida," need foreign corporation to
Please return all corres	pondence concerning this ma	tter to the following:	
	(Name	e of Person)	
NovaStar	Real Estate		Inc.
8140 Wa		(Company)	
	(A	ddress)	
Kansas	Cita MD 10	4114	
		ate and Zip code)	
For further information	n concerning this matter, pleas	se call:	
Shawna to (Name of Pers	Hart at (81)	6) 237-7508 ea Code & Daytime Teleph	one Number)
STREET ADI Registration So Division of Co 409 E. Gaines Tallahassee, F	ection orporations St.	MAILING AI Registration S Division of Co P.O. Box 632' Tallahassee, F	ection orporations 7
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. NovaStar Real E	state Holdings, Inc.		
(Enter name of co	rporation; must include "INCORPORAT" rp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"
(If name unavaila	ble in Florida, enter alternate corporate na	me	adopted for the purpose of transacting business in Florida)
	•		
2. Delaware (State or country u	nder the law of which it is incorporated)	3.	(FEI number, if applicable)
07/10/2006	mas the law of when his meorperated,		David I
· ———	of incorporation)	5.	Perpetual (Duration: Year corp. will cease to exist or "perpetual")
	•		(Duration: Teal corp. will cease to exist of perpetual)
6. Upon Qualification		!	Fig. 14 16 - 1 - 1 - 1 - 1
			n Florida, if prior to registration) 502, F.S., to determine penalty liability)
7.8140 Ward Parkwa	ny, Kansas City, MO 64114		to B
	(Principal office	addı	ress)
same			
	(Current mailing	addı	ress)
8. foreclosure activi	ties		THE TO
		r co	ountry to be carried out in state of Florida)
9. Name and street	address of Florida registered agent: (P.O	DM U
Name:	C T Corporation System	_	
Office Address:	1200 South Pine Island Road		
	Plantation		, Florida33324
	(City)		(Zip code)
designated in this d further agree to co	d as registered agent and to accept se application, I hereby accept the appoint mply with the provisions of all statute with and accept the obligations of my CT Corporation System	intm es re pos	ce of process for the above stated corporation at the place nent as registered agent and agree to act in this capacity. I elative to the proper and complete performance of my dution sition as registered 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

FL019 - 04 07.05 C T Filing Manager Online

under the law of which it is incorporated.

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

A. DIRECTORS	
Chairman:	
Address:	
Vice Chairman:	- 100 B - 11
Address:	温 岛
	935. = M
Director: Walter Lance Anderson	THE TOTAL
Address: 8140 Ward Parkway	Z: 0
Kansas City, mo 64114	Drit of
Director: Scott F. Hartman	
Address: 8140 Ward Parkway	
Kansas City, mo 64114	
B. OFFICERS SEE ATTACHMENT	
President: Christopher S. Miller	
Address: 8140 Ward Parkway	
Kansas City, MO 64114	
Vice President: Scott Forst	
Address: 8140 Ward Parkway	
Kansas City, MO 64114	
Secretary: Jeffrey D. Ayers	_ <u>,</u>
Address: 8140 Ward Parkway, Kansas City, MO 64114	
Treasurer: Todd M. Phillips	
Address: 8140 Ward Parkway, Kansas City, MO 64114	
NOTE Thecessary, you may attach an addendum to the application listing additional of 13.	
(Signature of Director or Officer listed in number 12 of the applicat	ion)
14. Shawna M. Hart, Asst. Secretary (Typed or printed name and capacity of person signing application)	n)

Attachment to Florida

Officers & Directors -

1. Full Name:

Officer/Director: Officer's Title:

Business Address:

City: State: ZIP Code:

2. Full Name:

Officer/Director: Officer's Title:

Business Address:

City: State: ZIP Code:

3. Full Name:

Officer/Director: Officer's Title:

Business Address:

City: State: ZIP Code:

4. Full Name:

Officer/Director: Officer's Title:

Business Address:

City: State: ZIP Code:

5. Full Name:

Officer/Director: Officer's Title:

Business Address:

City: State: ZIP Code:

6. Full Name:

Officer/Director: Officer's Title:

Business Address:

City: State: ZIP Code: Christopher S. Miller

Officer
President
8140 Ward Parkway
Kansas City
MO
64114

Scott Forst Officer

Vice President 8140 Ward Parkway

Kansas City MO 64114

Gregory S. Metz

Officer

Vice President 8140 Ward Parkway

Kansas City

MO 64114

Ronda Scrader

Officer

Vice President

8140 Ward Parkway

Kansas City

MO 64114

Jeffrey D. Ayers

Officer Secretary

8140 Ward Parkway

Kansas City

MO 64114

Shawna M. Hart

Officer

Assistant Secretary 8140 Ward Parkway

Kansas City

MO 64114

- 7. Full Name:
 - · Officer/Director:
 - Officer's Title:

Business Address:

City: State:

ZIP Code:

Todd M. Phillips Officer Treasurer 8140 Ward Parkway Kansas City MO 64114



Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NOVASTAR REAL ESTATE HOLDINGS, 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 ELEVENTH DAY OF JULY, A.D. 2006.

SECRETARY OF STATE



Warriet Smith Windson, Secretary of State

AUTHENTICATION: 4891983

DATE: 07-11-06

4187832 8300

060657204