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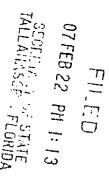
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Brokers Mortgage Service, Inc. (Name of corporation - must include suffix)		
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Flor "Certificate of Existence," and check are submitted to register the above referenced foreign corpo transact business in Florida.		
Please return all correspondence concerning this matter to the following:		
Kirk Johnson		
(Name of Person)		
Brokers Mortgage Service, Inc.		
(Firm/Company)		
Brokers Mortgage Service, Inc. (Firm/Company) 4343 Crane Cf (Address) Loveland, Co 80537 (City/State and Zip code)		
(Address)	77	
Loveland, Co 80537	8	
Coveland, Co 80537 (City/State and Zip code)		
For further information concerning this matter, please call:	PH I: I	
Kiak Johnson at (970) 593-1354 P	ηω	
(Name of Person) at (970) 593-1354 Property (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 \$\ \tag{\$78.75 Filing Fee & \tag{\$87.50 Filing Fee & Certificate of Status}\$\$ Certified Copy	f 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. Brokers Mortgree Service Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," of "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) Colorado USA
(State or country under the law of which it is incorporated)

(FEI number, if applicable) Colorado (Duration) 5. (Duration Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 4343 Crane Ct Loveland, Co 80537

(Principal office address)

4343 Crane Ct Loveland, Co 80537

(Current mailing address) 8. Mortgage Broker

(Purpose(s) of Gorporation 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) TAMMY ACKER

2394 Rajel Ave

Safely Harbor , Florida 34695

(City) (Zip code) Name: Office Address: 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,

(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 under the law of which it is incorporated.

and I am familiar with and accept the obligations of my position as registered agent.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Kink Johnson Address: 4343 CrAME Cf Loveland, Lo 80537 Vice Chairman: Address: ____ Director: Address: Director: _ Address: **B. OFFICERS** President: Kiak Johnson Address: 43 73 Come of Vice President: Address: ___ Secretary: __ Address: __ Treasurer: _____ Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) 14. _ Kink Johnson Johnson
(Typed or printed name and capacity of person signing application)



DEPARTMENT OF STATE

CERTIFICATE

I, MIKE COFFMAN, SECRETARY OF STATE OF THE STATE OF
COLORADO HEREBY CERTIFY THAT ACCORDING TO THE RECORDS OF
THIS OFFICE,

BROKERS MORTGAGE SERVICE INC. (COLORADO CORPORATION)

BECAME INCORPORATED UPON FILING ARTICLES OF INCORPORATION DATED DECEMBER 8, 1993.

Dated: February 12, 2007

Wik Coffm

SECRETARY OF STATE