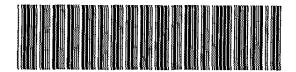
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SECRELARY OF STATE

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## COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Shadoward	Mortgage Lovo, ration - must include suffix)
Dear Sir or Madam:	
	for Authorization to Transact Business in Florida," to register the above referenced foreign corporation to
Please return all correspondence concerning this m	atter to the following:
Shaclawood (Firm	Y JOY GAGE LDV
_3a Shadagaad	Dr
Hopewell Jos	Addréss)  Addréss)  Late and Zip code)
For further information concerning this matter, plea	ase call:
Jessico Schoto at (84 (Name of Person) at (A	15 2245 rea 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 & S87.50 Filing Fee, Certified Copy Certified Copy Certified Copy



February 12, 2007

JESSICA M. SCHOEN / SHADOWOOD MORTGAGE CORP 32 SHADOWOOD DR. HOPEWELL JCT., NY 12533

SUBJECT: SHADOWOOD MORTGAGE CORP.

Ref. Number: W07000007182

We have received your document for SHADOWOOD MORTGAGE CORP. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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) 245-6047.

Carolyn Lewis Document Specialist

Letter Number: 107A00010433

## 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. Shadowood Mortgage Corp.  (Enter name of corporation; must include "INCORPORATED," CONMANY," "CORPORATION,"
"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. 100 YO
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. (Date of incorporation)  5. (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)  32 Shortcumod Dv Hopeing II, let Ny 1253
(Principal office address)
32 Shadowood Dr. Hoseut Jot NY 12538 (Current mailing address)
8. Mortgage Brotter
(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)
The state of the s
Office Address: 1375 NF DXIHWY 107 43
Ansch Brach, Florida 34975 Figure (City), Florida (Zip code)
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.
Linda Schoen

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.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors:	2007 - LEL
A. DIRECTORS	2007 FFB 22
Chairman: Jessica Schoen	2007 FEB 27 PM 3:
Address: 33 Shadowood DV	ALLAHASSE OF STAT
Hopewell VI 19 12533	- LORIL
Vice Chairman:	
Address:	# # # # # # # # # # # # # # # # # # #
Director:	11 <del>(=</del> 11) 11. 11 €
Address:	
Director:	*
Address:	
Additions.	
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B. OFFICERS	
President: Shadawaad A	
Address: OO ONUUUUUUU	
TIPELLI JU NY 18535	
Vice President:	**************************************
Address:	
Secretary: JLSSICQ SChOLA	3-
Address:	<del></del>
Treasurer: Jessica Schola	· · · · · · · · · · · · · · · · · · ·
Address:	· · · · · · · · · · · · · · · · · ·
NOTE: If necessary, you may attach an addendum to the application listing additional officer	is and/or directors.
(Signature of Director or Officer listed in number 12 of the application)	
	tent
(Typed or printed name and capacity of person signing application)	

## State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of SHADOWOOD MORTGAGE CORP. was filed on 11/18/2002, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 30th day of January two thousand and seven.

Special Deputy Secretary of State

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