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#### **COVER LETTER**

TO: New Filing Section Division of Corporations	
SUBJECT: MORTGA	GES UNLIMITED, INC.  Corporation - must include suffix)
(Name of	corporation - must include suffix)
Dear Sir or Madam:	
	oration for Authorization to Transact Business in Florida," omitted to register the above referenced foreign corporation to
Please return all correspondence concerning	this matter to the following:
RICHARD W.	WALKER
	(Name of Person)
MORTGAGES UN	LIMITED INC (Firm/Company)
3324 KYLEE	DAWN CIR  (Address)  LE GA, 30045  City/State and Zip code)
	(Address)
LAW RENCEVIL	LE GA, 30045
(0	City/State and Zip code)
For further information concerning this matter	
(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	t:
\$70.00 Filing Fee \$78.75 Filing Fe Certificate of S	



February 19, 2007

RICHARD W. WALKER 3324 KYLEE DAWN CIR LAWRENCEVILLE, GA 30045

SUBJECT: MORTGAGES UNLIMITED, INC.

Ref. Number: W07000008548

We have received your document for MORTGAGES UNLIMITED, 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):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

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) 245-6928.

Letter Number: 407A00012198

Tim Burch Document Specialist



February 27, 2007

RICHARD W. WALKER 3324 KYLEE DAWN CIR LAWRENCEVILLE, GA 30045

SUBJECT: MORTGAGES UNLIMITED GROUP, INC.

Ref. Number: W07000008548

We have received your document for MORTGAGES UNLIMITED GROUP, 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):

The designation of the registered agent must be at a Florida street address.

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) 245-6928.

Letter Number: 607A00014199

Tim Burch 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. MORTGAGES UNLIMITED, The (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp." "Inc," "Co," or "Corp.")	
MORTGAGES UNLIMITED GROUP, INC.	
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)  2. GEORGIA  3. 76-0833059  (State or country under the law of which it is incorporated)  (FEI number, if applicable)	
(State or country under the law of which it is incorporated) 4. \[ \frac{\text{TULY /1, 2006}}{\text{Date of incorporation}} \] 5. \[ \frac{\text{PEl number, if applicable}}{\text{(Duration: Year corp. will cease to exist or "perpetual")}} \]	
6. MONE	
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
7. 3324 KYLEE DAWN CIR, LAWRENCEVIUE, GA. 30045 (Principal office address)	
(Current mailing address)	
8. MORTGAGE BROKERS 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: KICHARD K/ALKER  Office Address: 9873 WANRENCE RD#E/02	
BOYNTON BEACH, Horida 33436 (City) (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.	•
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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.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: ANDRENCEY INE GA, 30045 Vice Chairman: POURENCE VILLE GA, 30045 Director: Address: Director: \_\_\_ Address: **B. OFFICERS** President: AWRENCEVILLE GA 30045 Secretary: \_ Address: \_ Treasurer: Address: \_\_\_\_\_ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

(Typed or printed name and capacity of person signing application)

Director or Officer listed in number 12 of the application)

13.

14.

Control No. 0653551

## STATE OF GEORGIA

## Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

# CERTIFICATE OF EXISTENCE

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

#### MORTGAGES UNLIMITED, INC.

#### **Domestic Profit Corporation**

was formed or was authorized to transact business on 07/11/2006 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 12th day of February, 2007

Karen C Handel Secretary of State

Faven C. Handel

Certification Number: 727893-1 Reference:

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp