# F07000001843

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Certified Copies	_ Certificates	s of Status		
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W. Car

# **COVER LETTER**

TO: New Filing Section Division of Corporations	
SUBJECT: Ameritrust Mortgage, Ir	nc.
	on - must include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence," and check are submitted to r transact business in Florida.	
Please return all correspondence concerning this matter	to the following:
Stephanie R. Owens	
(Name of	Person)
Ameritrust Mortgage, Inc.	
(Firm/Co	mpany)
204 Eagle Bend Dr.	
(Addı	ress)
Waxhaw, NC. 28173	
	and Zip code)
For further information concerning this matter, please of	all:
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Stephanie R. Owens at 704	<sub>)</sub> 568-1020
	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{Certificate of Status}	\$78.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy



### FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED 07 APR -5 PM 2: 34

DEPARTMENT OF STATE DIVISION OF CORPORATIONS TALLAHASSEE, FLOREIA

March 29, 2007

STEPHANIE R OWENS AMERITRUST MORTGAGE, INC. 204 EAGLE BEND DR WAXHAW. NC 28173

SUBJECT: AMERITRUST MORTGAGE, INC.

Ref. Number: W07000015485

We have received your document for AMERITRUST MORTGAGE, INC. 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 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 set of the laternate 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 document number of the name conflict is L04000090508 (AMERITRUST MORTGAGE, LLC).

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) 245-6855.

Tammy Hampton Document Specialist

Letter Number: 707A00021591

# 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.

լ Ameritru	ust Mortgage, Inc.		
(Enter name of	corporation; must include "INCORPORATED Corp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATION,"	
Ameriti	rust Mortgage of North Car	olina, Înc.	
(If name unavai	lable in Florida, enter alternate corporate name	e adopted for the purpose of transacting bu	siness in Florida)
2 North Čarolina 3 20-8510363			
	under the law of which it is incorporated)	(FEI number, if applicab	le)
4, 3/15/200	07	Perpetual	,
	e of incorporation)	(Duration: Year corp. will cease to exis	t or "perpetual")
<sub>6.</sub> N/A			
		in Florida, if prior to registration) 502, F.S., to determine penalty liability)	
<sub>7</sub> 204 Eag	le Bend Dr. Waxhaw, NO	C. 28173	
/·	(Principal office add		
204 Eag	le Bend Dr. Waxhaw, NO	C. 28173	
	(Current mailing add	dress)	
Mortgog	o Broker		
8. Mortgag	(s) of corporation authorized in home state or c	ountry to be carried out in state of Florida	1
	•	·	2007 APR -5 SECRETARY TALLAHASSI
9. Name and stre	et address of Florida registered agent: (P.	O. Box NOT acceptable)	LAR TI
Name:	NRAI Services, Inc.		HAZA L
Office Address:	2731 Executive Park Dr., Ste 4	<del></del>	
	Weston	, Florida	OF STATE
	(City)	(Zip code)	
Having been nan designated in thi further agree to	agent's acceptance: ned as registered agent and to accept serv is application, I hereby accept the appoint comply with the provisions of all statutes in tr with and accept the obligations of my pa	ment as registered agent and agree to relative to the proper and complete pe	poration at the place act in this capacity. I
,	Br: Christ The	3/20/07	

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.

Christian Eubanks, Assistant Secretary

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

A. DIR	ECTORS			
Chairman	n:			
Address:		***		
Vice Chai	irman:			
Address:				<u> </u>
-				
Director:				
Address:				
Director:				
Address:				·
		ALEG PEGE	2007 APR	4.4.197
B. OFF	ICERS	HA.	PR -	-37-01
President:	Stephanie R. Owens	RY C	က်	Canader
	204 Eagle Bend Dr. Waxhaw, NC. 28173	77 0:	- H	-
		NA PA		
Vice Presi	Stephanie R. Owens	T.		
	204 Eagle Bend Dr. Waxhaw, NC. 28173			
Secretary:	Stephanie R. Owens			
	204 Eagle Bend Dr. Waxhaw, NC. 28173			
Treasurer:	Stephanie R. Owens			
Address:	204 Eagle Bend Dr. Waxhaw, NC. 28173			
	If necessary, you may attach an addendum to the application listing additional officers and/o	or directo	ors.	
الع	Stephanie R Queno. (Signature of Director or Officer listed in number 12 of the application)			
14	Stephanie R Owens  (Signature of Director or Officer listed in number 12 of the application)  Stephanie R Owens president  (Typed or printed name and capacity of person signing application)			
14.	(Typed or printed name and capacity of person signing application)			



# NORTH CAROLINA Department of The Secretary of State

#### CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

## AMERITRUST MORTGAGE, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 15th day of March, 2007, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 15th day of March, 2007.

6 laine I. Marshall

Secretary of State