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(Re	equestor's Name)	
(Address)		
(Address)		
(Cit	ty/State/Zip/Phone	e #)
_	WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
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Office Use Only



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SECRETARY OF STATE ALLAHASSEE, FLORID!

08 APR -4 PH 3: 35



COVER LETTER

Division of Corporations		
SUBJECT: Candor Mortgage Corpora	The second secon	
(Name of corporat	ion - must include suffix)	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for "Certificate of Existence," and check are submitted to transact business in Florida.		
Please return all correspondence concerning this matt	er to the following:	
Thomas Moskey, IV		
(Name	of Person)	
Candor Mortgage Corporation		
(Firm/Company)		
8167 Main Street, Suite 205		
	dress)	
Ellicott City, MD 21043		
(City/Stat	e and Zip code)	
For further information concerning this matter, please	e call:	
Thomas Moskey, IV at (410	₎ 203-1408	
Thomas Moskey, IV (Name of Person) at (410) 203-1408 (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 \$\ \text{Certificate of Status}\$	\$78.75 Filing Fee & \$87.50 Filing Fee, Certified Copy 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.

	ortgage Corporation orporation; must include "INCORPORATED	" "COMPANY" "CORPORATION"
	orp," "Inc," "Co," or "Corp.")	
(If name unavails	able in Florida, enter alternate cornerate name	adopted for the purpose of transacting business in Florida)
2. Virginia		(FEI number, if applicable)
4 1/4/2008	under the law of which it is incorporated)	Pernetual
4. 11 11 2 3 3 3	of incorporation) 5.	Perpetual (Duration: Year corp. will cease to exist or perpetual)
(Bate	o. morpolation,	CS E
6	(Date first transacted business	in Florida, if prior to registration)
	(SEE SECTIONS 607.1501 & 607.1	502, F.S., to determine penalty liability)
7. 8167 Main	Street, Suite 205; Ellicott C	
	(Principal office add	$\mathcal{L}_{\mathcal{L}}$
8167 Main	Street, Suite 205; Ellicott C	_ -
	(Current mailing add	dress)
_{8.} Mortgage	Brokering	
) of corporation authorized in home state or c	ountry to be carried out in state of Florida)
•	et address of Florida registered agent: (P.0	·
		5. Box NOT acceptable)
Name:	Paracorp Incorporated	
Office Address:	236 East 6th Avenue	
	236 East 6th Avenue Tallahas	see, Florido 32303
	(City)	(Zip code)
10 Peristored an	gent's acceptance:	
		ice of process for the above stated corporation at the place
designated in this	application, I hereby accept the appoints	ment as registered agent and agree to act in this capacity. I
	omply with the provisions of all statutes i with and accept the obligations of my po	relative to the proper and complete performance of my duties, osition as registered agent.
		c .
_	(P	
	(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.

12. Names and business addresses of officers and/or directors:	FILED
A. DIRECTORS	08 APR -4 PM 3: 36
Chairman: Thomas Moskey, IV	SECONT 1 PM 3: 36
Address: 8167 Main Street, Suite 205	SECRETARY OF STATE FALLAHASSEE, FLORIDA
Ellicott City, MD 21043	
Vice Chairman:	
Address: 8167 Main Street, Suite 205	
Ellicott City, MD 21043	
Director: lan Markley	
Address: 8167 Main Street, Suite 205	•
Ellicott City, MD 21043	
Director:	
Address:	
B. OFFICERS	
President: Thomas Moskey, IV	
Address: 8167 Main Street, Suite 205	
Ellicott City, MD 21043	
Vice President:	· · · · · · · · · · · · · · · · · · ·
Address:	
Secretary: Jason Metter	,
9167 Main Stroot, Suita 205: Ellicatt City, MD 21	043
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional add	tional officers and/or directors.
(Signature of Director or Officer listed in number 12 of the	application)
(D.B. and D. D. and D. C. C. and D. a	

14. Thomas Moskey, IV - President

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

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SECRETARY OF STATE
ALLAHASSEE. FLORIDA

STATE OF FLORIDA

REGISTERED AGENT CONSENT FORM

DATE: 1/14/2008

ENTITY NAME: CANDOR MORTGAGE CORPORATION

REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 236 East 6th Avenue Tallahassee, FL 32303

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in that capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statutes.

Ninh Ho, Assistant Secretary Paracorp Incorporated

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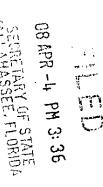
State Corporation Commission

I Certify the Following from the Records of the Commission:

CANDOR MORTGAGE CORPORATION is a corporation existing under and by virtue of the laws of Virginia, and is in good standing.

The date of incorporation is January 04, 2008.

Nothing more is hereby certified.





Signed and Sealed at Richmond on this Date: January 10, 2008

Joel H. Peck, Clerk of the Commission