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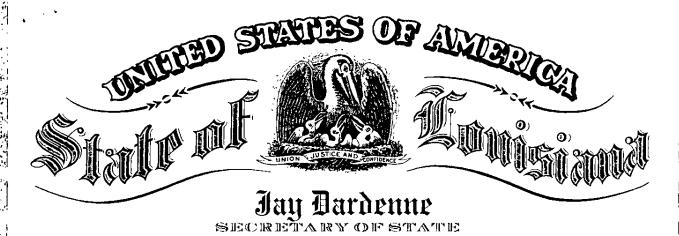
	f Corporations			
SUBJECT:/	VEN CENTURY ME Name of corpor	onto AGE OF ration - must include suff	Lovisi ANI	9 INC.
Dear Sir or Madam	<b>:</b>			
	lication by Foreign Corporation tence," and check are submitted Florida.			
Please return all con	rrespondence concerning this n		SECRE	7001 HAY 15
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New Filing Division of Clifton Bui 2661 Execu	Corporations	New Filin Division o P.O. Box	of Corporations	
New Filing Division of Clifton Bui 2661 Execu Tallahassee	Section Corporations Iding ative Center Circle c, FL 32301	New Filin Division o P.O. Box	g Section of Corporations 6327	
New Filing Division of Clifton Bui 2661 Execu Tallahassee	Section Corporations Iding ative Center Circle c, FL 32301 for the following amount:	New Filin Division o P.O. Box	g Section of Corporations 6327 cc, FL 32314	ate of 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.
1. NEW CENTURY Montisate of LOUIS, and, Inc. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
me, co., corp. me, co, or corp. )
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. LOUISIANA (State or country under the law of which it is incorporated) (FEI number, if applicable)
9/14/98 DER DEFUAL
4. 9/14/98 5. PER PET UAL (Date of incorporation)  [Duration: Year corp. will cease to exist or "perpetual")
6. N/A (Date first transacted business in Florida, if prior to registration)
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. Louis KENTZET
(Principal office address)
726 EAST RUHLAND ST COVINGTON, LA 70433 (Current mailing address)
(Current mailing address)
8. Montgage Brokepage 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: DALLAS MCRAE
Office Address:  Office Address:  Onlando, Fl (City)  (City)  Onlando, Fl (Zip code)  (Zip code)  Onlando, Fl (Zip code)
ONLANDO FL Florido 32806 SER -
(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.
La 165
Jan My
(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:	
A. DIRECTORS	
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	· · · · · · · · · · · · · · · · · · ·
Director:	AH HAY
Address:	
	THE DO
B. OFFICERS	TATE ORIDA
President: LOVIS   LENTZE    Address: 726 EAST RUTLAND  COVINGTON, LA 7043	
Address: 706 27131 701 0710	2
	3
Vice President:	
Address:	
Sceretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing	ng additional officers and/or directors.
12 /2	
(Signature of Director or Officer listed in number 12	of the application)
14. (Typed or printed name and approximately	alian and Paulian
(Typed or printed name and capacity of person sig	ning application)



As Secretary of State, of the State of Louisiana, I do hereby Certify that

the Articles of Incorporation of

NEW CENTURY MORTGAGE OF LOUISIANA, INC.

Domiciled at COVINGTON, LOUISIANA,

Were filed in this Office and a Certificate of Incorporation was issued on September 15, 1998,

I further certify that no Certificate of Dissolution has been issued.

In lestimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

May 11, 2009

MBU 34685867D

Secretary of State

