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(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)	_			
(Document Number)	_			
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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COVER LETTER

TO:	New Filing Sec Division of Cor			
SUBJ	ECT: IVY M	lortgage, Inc		
			ation - must include suffix	
Dear S	ir or Madam:			
"Certif	icate of Existence	ion by Foreign Corporation e," or "Certificate of Good n corporation to transact bu	for Authorization to Transact Standing" and check are subm siness in Florida.	Business in Florida," litted to register the
Please	return all corresp	ondence concerning this m	atter to the following:	
Chad	oqi Su			
		Name	e of Person	
IVY	Mortgage,	Inc.		
		Firm/	Company	
762	5 Maple La	wn Blvd, Suite 13	5	
		A	ddress	
Fulto	on, MD 2075	59 _		
		City/Sta	ite and Zip code	
zoe@	ivymtg.com			
		E-mail address: (to be us	sed for future annual report no	tification)
For fur	ther information	concerning this matter, plea	se call:	
Chac	ogi Su	at (301	317-1010	
	Name of Person	1 A	rea Code & Daytime Telephor	ne Number
F. 1	New Filing Sect Division of Corp Clifton Building 2661 Executive Tallahassee, FL	porations S Center Circle 32301	MAILING AD New Filing Sect Division of Cor P.O. Box 6327 Tallahassee, FL	ion porations
Enclose	ed is a check for t	he following amount:	•	
☐ ^{\$7}	0.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, 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.

1.	JVY Mortgage, Inc.	
	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "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.	Maryland 3, 27-2105834	
	(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4.	03-02-2010	
	(Date of incorporation) (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)	
7.	7625 Maple Lawn Blvd Suite 135, Fulton, MD 20759	
	(Principal office address)	
	7625 Maple Lawn Blvd Suite 135, Fulton, MD 20759	
	(Current mailing address)	
8.	THE COMPANY IS FORMED TO ENGAGE IN ANY LAWFUL BUSINESS INCLUDING BUT NOT LIMITED TO MORTGAGE BROKER SERVICES, EXCEPT THE BUSINESS ACT AS IN INSTREME	7
	(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)	フ
	Name: InCorp Services, Inc.	
Oi	ffice Address: 17888 67th Court North	
	Loxahatchee, Florida 33470	
	(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.

Diane & Kolenowski, on beholf of: INCORP SERVICES, INC.
(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 Chairman: Qing Li Address: 10062 Carillon Drive, Ellicott City, MD 21042 Vice Chairman: Address: _ ____ Director: Chaoqi Su Address: 8458 Greystong Ln, Apt 3E, Columbia, MD 21045 **B. OFFICERS** President: CHAOQI 5U Address: 8458 BREYSTONG LN, APT 3E COLUMBIA, MD 21045 Vice President: Secretary: Treasurer: Address: _____ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. 14. CHA 6QI SV, Director

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

STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT IVY MORTGAGE, INC., INCORPORATED MARCH 02, 2010, IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS OCTOBER 19, 2012.

Paul B. Anderson Charter Division

Faul B. Under

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301 West Preston Street, Baltimore, Maryland 21201
Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941
MRS (Maryland Relay Service) (800) 735-2258 TT/Voice
Fax (410) 333-7097