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## COVER LETTER

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SUBJEC"	r. Corri	dor Mortg	age Gr	oup	, Inc.	
SOBSEC	••				nust include suffix	
Dear Sir or	· Madam:					
"Certificat	e of Existence		te of Good	Standi	ng" and check are sub	ct Business in Florida," mitted to register the
Please retu	rn all corres	pondence concer	ning this m	atter to	the following:	
Elizab	eth Anr	ne Larney				
			Name	of Pe	son	
Corrid	or Mort	gage Gro	up, Inc.			
			Firm/C	Compa	ny	· · · · · · · · · · · · · · · · · · ·
11085	Stratfie	eld Court				
			A	ddress		
Marrio	ttsville,	MD 2110	)4			
	· · · · · · · · · · · · · · · · · · ·			te and	Zip code	
LLarne	y@corri	dormtg.cor				
	· · · · · ·	E-mail addre	ss: (to be us	ed for	future annual report i	notification)
For further	information	concerning this	matter, plea	ise cal	:	
Elizab	eth Lar	ney	at (410	<b>)</b> )	313-9900	
N	ame of Perso	n	Aı	ea Co	de & Daytime Teleph	one Number
Ne Di Cli 26	w Filing Sec vision of Co lifton Buildin	porations g Center Circle	SS:		MAILING A New Filing Se Division of Co P.O. Box 6327 Tallahassee, F	ction orporations 7
Enclosed is	s a check for	the following ar	nount:			
<b>\$70.00</b>	Filing Fee	\$78.75 Fili Certificate			78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate 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.

	Nortgage Group, Inc. poration; must include "INCORPORATE rp," "Inc," "Co," or "Corp.")	ED," "COMPANY," "CORPORATION,"
(If name unavailat	ole in Florida, enter alternate corporate na	me adopted for the purpose of transacting business in Florida)
Maryland	•	<sub>3.</sub> 30-0142226
	nder the law of which it is incorporated)	(FEI number, if applicable) 5. Perpetual
	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
11085 Stra	(Principal office a tfield Court, Marriottsville	e, MD 21104
	(Current mailing a	iddress)
Mortgage		country to be corried out in state of Florida)
(Purpose(s)	of corporation authorized in home state or	r country to be carried out in state of Florida)  (P.O. Box, NOT acceptable)
(Purpose(s)		P.O. Box NOT acceptable)
(Purpose(s)  Name and street	of corporation authorized in home state or address of Florida registered agent: (	P.O. Box <u>NOT</u> acceptable)
(Purpose(s)  Name and street  Name:	of corporation authorized in home state or address of Florida registered agent: ( CT Corporation System	P.O. Box <u>NOT</u> acceptable)

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.

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.

(Regulered agent's signature)

12. Name's and business addresses of officers and/or directors: A. DIRECTORS Chairman: Vice Chairman: B. OFFICERS President: Jerry Rader, President and CEO Address: \_11085 Stratfield Court Marriottsville, MD 21104 Vice President: Ronald A. Mason, Sr. Vice President and COO Address: 11085 Stratfield Court Marriottsville, MD 21104 Secretary: Michelle Rader, Sr. Vice President and Secretary Address: 11085 Stratfield Court, Marriottsville, MD 21104 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. Jerry Rader, President

## 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 CORRIDOR MORTGAGE GROUP, INC., INCORPORATED DECEMBER 22, 2002, 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 DECEMBER 26, 2013.

Paul B. Anderson Charter Division



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