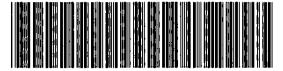
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. (Re	equestor's Name)		
(Address)			
(Address)			
(Cit	ty/State/Zip/Phone	; #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nam	ne)	
(Do	ocument Number)		
Certified Copies	Certificates	of Status	
Special Instructions to	Filing Officer:		
,			

Office Use Only



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A MAN

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Colonial Mortgage S	Service Company of America
SEBSECT:	oration - must include suffix
Dear Sir or Madam:	
	on for Authorization to Transact Business in Florida," od Standing" and check are submitted to register the business in Florida.
Please return all correspondence concerning this	matter to the following:
Rebecca Hanson	
Nai	me of Person
Quik Filings, LLC	
Firm	n/Company
7855 Reindeer St	
	Address
Portage, MI 49002	
City/S	State and Zip code
rhanson@quikfilings.com	
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, p	lease call:
Rebecca Hanson	69 ₎ 743-4201
Name of Person	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 □ \$78.75 Filing Fee & Certificate of Statu	

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.} Colonial I	Mortgage Service Compa	any of America	1.1.1 1.1.1.1 1.1.1.1.1 1.1.1.1.1
"Ing " "Co " "C	orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	D," "COMPANY," "CORPORATION," ne adopted for the purpose of transacting business 3	14 JAH -9
(If name unavaila	able in Florida, enter alternate corporate nam	ne adopted for the purpose of transacting business	in Florida
_{2.} Pennsylv	ania	3	=
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)	<u> </u>
_{4.} 6/19/1992		_{5.} Perpetual	
	of incorporation)	(Duration: Year corp. will cease to exist or "p	erpetual")
6.			
418 Stum		s in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)	
7. 410 Otalii	(Principal office a		
418 Stumr	o Rd, Suite 100 Montgom	•	
<u>+10 Stani</u>	(Current mailing a		
o		it reports for the purpose of Mortgage Loan Origination and	Jnderwriting.
. (Purpose(s) of corporation authorized in nome state or	country to be carried out in state of Florida)	
9. Name and stree	et address of Florida registered agent: (P.O. Box NOT acceptable)	
Name:	InCorp Services, Inc.		
Office Address:	17888 67th Court North	<u>1</u>	
	Loxahatchee	, Florida 33470	
	(City)	(Zip code)	
10 Registered ac	pent's acceptance		

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.

Reluced brown, attorney at fast for uncop Services, una

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: Joseph A. Splendido
Address: 418 Stump Rd. Suite 100
Montgomeryville, PA 18936-9645
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: Joseph A. Splendido
Address: 418 Stump Rd. Suite 100
Montgomeryville, PA 18936-9645
Workgomery vine, 1 72 10300-3043
Vice President:
Address:
Secretary: Joseph A. Splendido
Address: 418 Stump Rd. Suite 100 Montgomeryville, PA 18936-9645
Treasurer: Joseph A. Splendido
Address: 418 Stump Rd. Suite 100 Montgomeryville, PA 18936-9645
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
Signature of Director or Officer The officer of director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are troe-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. Joseph A. Splendido. President

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

NOVEMBER 25, 2013

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

COLONIAL MORTGAGE SERVICE COMPANY OF AMERICA

is duly incorporated as a Pennsylvania Corporation under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT, This Subsistence Certificate shall not imply that all fees, taxes, and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

Perce aile

Certification Number: 11477858-1

Verify this certificate online at http://www.corporations.state.pa.us/corp/soskb/verify.asp