375/201 13:26/25 From To: 8506126381 Division of Comparison Florida Disparament of state
Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.
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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page ジューン Doing so will generate another cover sheet.
To: Division of Corporations Fax Number : (850) 617-6381 From: Account Name : C T CORPORATION SYSTEM C TOTAL OF C C Account Number : FCA000000023 Phone : (850) 222-1092 Fax Number : (850) 878-5368 CUIE Of Submission 2/28 **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** Email Address:
FOREIGN PROFIT/NONPROFIT CORPORATION CENTERLINE MORTGAGE CAPITAL INC.
Electronic Filing Menu Corporate Filing Menu Help
https://efile.sunbiz.org/scripts/efilcovr.exe $3/2$

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375/2014 13:26:25 From: To: 8506176381

850-617-6381

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3/3/2014 11:58:33 AM PAGE 1/001 Fax Server



March 3, 2014

C T CORPORATION SYSTEM

FLORIDA DEPARTMENT OF STATE Division of Corporations

SUBJECT: CENTERLINE MORTGAGE CAPITAL INC. REF: W14000013533

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

If you have any further questions concerning your document, please call (850) 245-6052.

Maryanne Dickey Regulatory Specialist II New Filing Section FAX Aud. #: H14000049799 Letter Number: 714A00004583

> *RE-SUBMIT* Please relain original filing date of submission_68

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P.O BOX 6327 - Tallahassee, Florida 32314

(.2/8)

3/5/2014 13:26:25 From: To: 8506176381

COVER LETTER

TO: New Filing Section Division of Corporations

SUBJECT: Centerline Mortgage Capital Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Beth Chahine

	Name	oi rerson	
Centerline Mortgage Cap	ital Inc.		
	Firm/C	Company	····
100 Church Street, 15th I	loow		
	A	ddress	
New York, NY 10007			
	City/Sta	te and Zip code	
bchahine@centerline.com	a l		
	E-mail address: (to be us	ed for future annual report r	notification)
For further information	concerning this matter, plea	ise call:	
Beth Chahine	at (²¹²	521-6301	
Name of Perso		ea Code & Daytime Teleph	one Number
	JRIER ADDRESS:	MAILING A	
New Filing Sec Division of Co		New Filing Se Division of Co	
Clifton Buildin	-	P.O. Box 6327	7
2661 Executive Tallahassee, Fl		Tallahassoc, F	L 32314
Enclosed is a check for	the following amount:		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

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		TION FOR AUTHORIZATION TO TRANSACT	6
		STATUTES, THE FOLLOWING IS SUBMITTED TO. BUSINESS IN THE STATE OF FLORIDA.	28 PH
Centerline Mortg		····	۰ بې
	rporation; must include "INCORPORATED .rp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATION,"	сл е
(If name unavaila	bie in Flarida, enter alternate corporate name	e adopted for the purpose of transacting business in Florida)	
Delaware	3	13-3602661	
	inder the law of which it is incorporated)	(FEI number, if applicable)	
2/8/1991	5	perpetual	
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	
3/1/2014			
	(SEE SECTIONS 607.1501 & 607.1	in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	
100 Church Street	(Principal office ad	du	
New York, NY H	•••		4 -
	(Current mailing ad	dress)	
0			. O. /
•	origination and servicing of corporation authorized in home state or o	annum an ha samilad and in state of Planida	م سب
(Purpose(s	of corporation automzed in nome state or a	country to be carried out in Mate of Floriday	
. Name and stree	t address of Florida registered agent: (P	O. Box <u>NOT</u> acceptable)	ŗ
Name:	C T Corporation System		
office Address:	1200 South Pine Island Road	· <u> </u>	
	Plantation		
		(Zip code)	

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.

Sohan R. Dindyai C T Corporation System Vice President By: 2 d. (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.

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A. DIRECTORS	
Chairman:	
Address:	E E
·	22.
Vice Chaiman:	<u></u>
Address:	<u> </u>
·	97. 5
Director:	
Address:	
Director:	
Address:	<u></u>
B. OFFICERS	
President: see attached	
Address:	j •,
Vice President:	;
	<u></u>
Address:	<u></u>
	<u> </u>
Secretary:	
Address:	
Treasurer:	
Address:	·
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/o	r directors.
13. Jase Makido	

12. Names and business addresses of 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. Beth Chahine, Vice President

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

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Пс.
Capital
Mortgage
Centerline
Name:
Entity

		and Address with the stand	$M_{\rm M} = M_{\rm M} M_{\rm M}$	State ZIP	ZPT TO AND AND AND AND AND	
Fair, Alan		ite.	Deriver	00	80202	
Hunt, James C			Chicago	٦Ľ	60611	
Wrzosek, Robert	Board of Directors		New York	٨N	10007	
Andersen, Will		100 Church Street, 15th Floor	New York	٨N	10007	
Calvert, Greg		100 Church Street, 15th New York Floor	N a w Yark	NY	10007	
Casden, David		100 Church Street, 15th Floor	New York	λN	10007	
Gielchauf, Richard			El Paso	тx	79902	
Harchuck, Kara			Chicago	ਜ਼	60611	
Hunt, James C		2	Chicago	Į.	60611	
Hyman, Wilfiam T.			New York	λλ	10007	
ĥ		100 Church Street, 15th Floor	New York	٨٨	10007	
hey, Claudia		N. Mesa	El Paso	¥	79902	
blč		100 Church Street, 15th Floor	New York	λ	10007	
Kopsky, Paul		N. Mesa	El Paso	TX	79902	
		£	New York	ΥΥ	10007	
Melton, Philip A.			Dallas	¥	75254	
Miller, David A.		100 Church Street, 15th Floor	New York	λN	10007	E1201
Parker, Clay	Vice President	4401 N, Mesa	El Paso	ž	79902	

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3/5/2014 13:26:25 From: To: 8506176381

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Mizosek, Robert President 100 Church Street, 15th New York		79902
	NY 10007	

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3/5/2014 13:26:25 From: To: 8506176381

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Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAMARE, DO HEREBY CERTIFY "CENTERLINE MORTGAGE CAPITAL INC." IS DULY INCORFORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF FEBRUARY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

• :

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

je line AUTHENT TION: 1166341

DATE: 02-27-14

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140252258 You may verify this certificate enline at corp.delaware.gov/authwer.whtml 1 ł

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