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(Requestor's Name)			
(Add	dress)	_	
(Address)			
(City	//State/Zip/Phone	e #)	
PICK-UP	WAIT	MAIL	
(Bus	siness Entity Nan	ne)	
(Doc	cument Number)		
Certified Copies	Certificates	of Status	
Special Instructions to F			
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Office Use Only



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SECRETARY OF STATE

APPROVED FILED

COVER LETTER

TO: New Filing Sect Division of Corp				
SUBJECT: Ruoff	Mortgage	Compa	ny, Inc.	
	Name o	f corporation	n - must include suffix	
Dear Sir or Madam:				
The enclosed "Applicati "Certificate of Existence above referenced foreign	," or "Certificate	of Good Sta	nding" and check are sub	
Please return all correspondent	ondence concernir	g this matte	r to the following:	
Barbara Bisho	р			
		Name of	Person	
Ruoff Mortgag	e Compan	y, Inc.	d/b/a Ruoff Ho	me Mortgage
		Firm/Con	npany	
1110 E. Dupoi	nt Rd.			
Fort Wayne, II	N 46825	Addr	ess	
		City/State a	nd Zip code	
barb@ruoff.com		·		
For further information of		•	for future annual report	notification)
Barbara Bisho	p "	_{.t (} 260	, 497-0800	
Name of Person			one Number	
New Filing Sect Division of Corp Clifton Building 2661 Executive Tallahassee, FL	orations Center Circle	: '	MAILING A New Filing So Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7
Enclosed is a check for t	he following amou	ınt:		
□ \$70.00 Filing Fee	\$78.75 Filing Certificate of		\$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.

(If name unavailable in Florida, enter alternat 2. Indiana	the corporate name adopted for the purpose of transacting business in Florida) 35-1616238	
2. (State or country under the law of which it is		
4. September 17, 1984	5. <u>Perpetual</u>	
(Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	
_{6.} <u>n/a</u>		•
(SEE SECTIONS 6	insacted business in Florida, if prior to registration) 607.1501 & 607.1502, F.S., to determine penalty liability) Fort Wayne, IN 46825 fincipal office address)	
	terned agents (B.O. Par NOT aggentable)	<u>.</u>
 Name and street address of Florida regist Name: <u>InCorp</u> Se 		
Office Address: 17888 67+	th Court North	•
Loxahatch	nee , Florida 33470 Palm Beach (Zip code)	'ounty

(Registered agent's signature)

(Resistered agent's signature)

10. 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.

	APPROVEL		
11. Names and business addresses of officers and/or directors:	AND LL FILED		
A. DIRECTORS	14.1111 10 -		
Chairman:	14 JUL 10 PM 1:40		
Address:	SECRETARY OF STATE TAIL AHASSEE FLORIDA		
	-CATHI JE		
Vice Chairman:			
Address:			
,			
Fort Warne, IN 46845			
Director: Mark K. Music			
Fort Wayne, IN 46845			
B. OFFICERS			
President: Mark K. Music, President/CEO			
Address: 12227 Driftwood Pointe, Fort Wayne, IN 4	6845		
Vice President: Sarah E. Music, Sr. Vice President/Sec			
Address: 12227 Driftwood Pointe, Fort Wayne, IN 4	6845		
Secretary: Sarah E. Music, Sr. Vice President/Secret	tary		
Address: 12227 Driftwood Pointe, Fort Wayne, IN 4	6845		
Treasurer:			
Address:			
NOTE: If necessary, you may attach an addendum to the application listin	g additional officers and/or directors.		
12.			
The officer or director signing this document (and who is listed in number are true and that he or she is aware that false information submitted in a do a third degree felony as provided for in s.817.155, F.S.	12 above) affirms that the facts stated herein		
13. Mark K. Music President / CE (Typed or printed name and capacity of person sign	?D		
(Typed or printed name and capacity of person sign	ning application)		

APPROVEL AND FILED

SPECIAL AND REVOCABLE LIMITED POWER OF ATTORNEY

14 JUL 10 PM 1:40

SECRETARY OF STATE
TALLAHASSEE FLORIDA

TO ALL PERSON, be it known, that INCORP SERVICES, INC., A Nevada corporation as Grantor, does hereby make and grant a limited and specific power of attorney to Rebecca Hanson and appoint and constitute said individual as my attorney-in-fact.

My named attorney-in-fact shall have full power and authority to undertake, commit and perform only the following acts on my behalf to the same extent as if I had done so personally; all with full power of substitution and revocation in the presence:

Authority to accept appointment as registered agent on behalf of InCorp Services, Inc. (a Nevada Corporation) for entities which *Quik Filings, LLC have purchased agent service on through their account with InCorp Services, Inc.

TERMINATION: Unless sooner revoked or terminated by me, the Special Power of Attorney shall become NULL and VOID from and after December 31, 2014.

Aurora Murtey, Secretary

Dated: March 11, 2014

Signed in my presence this the 11th day of March 2014 by Aurora Murtey, State of Nevada. County of Clark

Notary Public in the State of Nevada

CRYSTAL TEMPLE-OWENS
Notary Public, State of Nevada
Appointment No. 09-11437-1
My Appt. Expires Nov 20, 2017

STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

APPROVEL AND FILED

14 JUL 10 PM 1:40

SECRETARY OF STATE FALLAHASSEE FLORIDA

To Whom These Presents Come, Greetings:

I, Connie Lawson, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

RUOFF MORTGAGE COMPANY, INC.

duly filed the requisite documents to commence business activities under the laws of State of Indiana on September 17, 1984, and was in existence or authorized to transact business in the State of Indiana on July 08, 2014.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Eighth Day of July, 2014.

Corrie Lawson

Connie Lawson, Secretary of State

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