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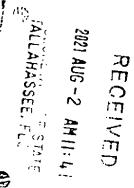
(Requestor's Name)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 935535 4331382

AUTHORIZATION (

COST LIMIT 7: \$ 70.00

ORDER DATE : July 29, 2021

ORDER TIME : 11:14 AM

ORDER NO. : 935535-005

CUSTOMER NO: 4331382

FOREIGN FILINGS

NAME: KB HOME MORTGAGE COMPANY

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT# 61594

EXAMINER: ____

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 unava	ilable in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)	
(State or country under the law of which it is incorporated)		(FEI number, if applicable)	
(Dat 6	e of incorporation)	(Date of duration, if other than perpetual)	
7. 10990 Wilshire	(SEE SECTIONS 607.1501 & 607.1 Blvd., 7th Floor, Los Angeles, CA 90024	in Florida, if prior to registration) 502, F.S., to determine penalty liability) lice street address)	
3. Name and stre		ng address, if different)	77
Name:	Corporation Service Company 1201 Hays Street	——————————————————————————————————————	
Office Address:	Tallahassee		
	(City)	(Zip code)	
	41		
urther agree to c	ned as registered agent and to accept servi application, I hereby accept the appoints	ce of process for the above stated corporation at the pla nent as registered agent and agree to act in this capacit elative to the proper and complete performance of my d sition as registered agent.	T

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

under the law of which it is incorporated.

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

A. DIRECTORS

□ Chairman	Name: Cory F. Cohen	□ Chairman	Name: William R. Hollinger
□Vice Chairman	10000 Wilshire Blud 7th Floor	□ Vice Chairman	Address: 10990 Wilshire Blvd., 7th Floor
Director	Los Angeles, CA 90024	Director	Los Angeles, CA 90024
□President		□President	
□Vice President		□Vice President	
☐ Secretary	□Treasurer	□ Secretary	☐Treasurer
Other	Other	☐Other	Other
□ Chairman	Mark Crivelli	□ Chairman	Name: Richard Silver
□Vice Chairman	Address: 10990 Wilshire Blvd., 7th Floor	☐ Vice Chairman	7807 East Peakview Avenue
□Director	Los Angeles, CA 90024	□Director	Suite 300
President		□President	Centennial, CO 80111
□Vice President		■Vice President	
□Secretary	□Treasurer	□Secretary	□Treasurer
Other	Other	Other	Other
□ Chairman	Name:	□Chairman	Name:
□Vice Chairman	Address:10990 Wilshire Blvd., 7th Floor	□ Vice Chairman	Address: 10990 Wilshire Blvd., 7th Floor
Director	Los Angeles, CA 90024	□Director	Los Angeles, CA 90024
□President		□President	
□Vice President		□Vice President	
Secretary	■ Treasurer	Secretary	□Treasurer
Other	Other	□Other	Other
Important Notice: I individuals may be	Use an attachment to report more than six (6). The at added to the index when filing your Florida Department of the control of	nent of State Annual Re	I for reporting purposes only. Non-indexed port form,
00	Signature of Director	or Officer	
The officer or direct she is aware that fa	ctor signing this document (and who is listed in numb	per 11 above) affirms the	at the facts stated herein are true and that he or

The officer or director signing this document (and who is listed in number 11 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.

13. Tony Richelieu, Secretary

File Number

4500-184-9



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

KB HOME MORTGAGE COMPANY, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JANUARY 27, 1965, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 29TH

day of

JULY

A.D.

2021

Authentication #: 2121003336 verifiable until 07/29/2022
Authenticate at: http://www.cyberdriveillinois.com

Desse White

SECRETARY OF STATE