

10/1/21, 3:45 PM

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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VALLAPASSETT, FLORIDA

To: Division of Corporations
Fax Number : (850)617-6383
From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: _____

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FILED

FOREIGN PROFIT/NONPROFIT CORPORATION

Mortgage Electronic Registration Systems, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

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Corporate Filing Menu

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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.*

Mortgage Electronic Registration Systems, Inc.

1. _____
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
2. _____
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
Delaware
3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. _____
(Date of incorporation)
5. _____
(Date of duration, if other than perpetual)
6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
5660 New Northside Drive NW, 3rd Floor, Atlanta, GA 30328
7. _____
(Principal office address)
- _____ (Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

C T Corporation System

Name: _____


1200 South Pine Island Road

Office Address: _____

Plantation, _____, Florida _____
(City) (Zip code)

9. 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.

By:  C T Corporation System
Stephen Rullis
(Registered 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.

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 DEPT. OF STATE
 TALLAHASSEE, FL

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman _____

Address: _____

Vice Chairman: _____

Address: _____

Chris McEntee

Director: _____

5660 New Northside Dr, NW, 3rd Floor, Atlanta, GA 30328

Address: _____

Edward Kramer

Director: _____

5660 New Northside Dr NW, 3rd Floor, Atlanta, GA 30328

Address: _____

B. OFFICERS

Chris McEntee

President: _____

5660 New Northside Dr, NW, 3rd Floor, Atlanta, GA 30328

Address: _____

Andrew Surdykowski

Vice President: _____

5660 New Northside Dr, NW, 3rd Floor, Atlanta, GA 30328

Address: _____

Sharon Horstkamp

Secretary: _____

5660 New Northside Drive NW, 3rd Floor, Atlanta, GA 30328

Address: _____

Martin Hunter

Treasurer: _____

5660 New Northside Dr, NW, 3rd Floor Atlanta, GA 30328

Address: _____

(see attached list of additional directors)

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.12. Sharon McGann Horstkamp
President, KLM, Inc. 10/1/2021

Signature of Director or Officer

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. Sharon McGann Horstkamp General Counsel

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

Directors

David Goone, Director
353 North Clark St, Chicago, IL 60654

Andrew Surdykowski, Director
5660 New Northside Drive NW, 3rd Floor, Atlanta, GA 30328

Officers

Warren Gardiner, Vice President
5660 New Northside Drive NW, 3rd Floor, Atlanta, GA 30328

Sandra Kerr, Assistant Treasurer
5660 New Northside Drive NW, 3rd Floor, Atlanta, GA 30328

Octavia Spencer, Assistant Secretary
5660 New Northside Drive NW, 3rd Floor, Atlanta, GA 30328

Joe Patry, Vice President
5660 New Northside Drive NW, 3rd Floor, Atlanta, GA 30328

Paul Van Fleet, Assistant Secretary
5660 New Northside Drive NW, 3rd Floor, Atlanta, GA 30328

Courtenay Dunn, Assistant Secretary
701 Pennsylvania Ave, NW, Washington, DC 20004

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC." IS DULY INCORPORATED 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 FIRST DAY OF OCTOBER, A.D. 2021.

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.



2990193 8300

SR# 20213403455

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 204304087

Date: 10-01-21