# F2200000018

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## FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

12/29/21

NAME: PRIVA MORTGAGE INC

TYPE OF FILING: APPLICATION

COST:

70.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

abbiettedy

## **COVER LETTER**

TO: Registration Se Division of Cor				
SUBJECT: Priva Mo	rtgage Inc			
	Name of corporation - must include suffix			
Dear Sir or Madam:				
The enclosed "Applicat "Certificate of Existence above referenced foreign	e," or "Certificate of	Good Standing"	and check are submit	
Please return all corresp	ondence concerning	this matter to the	e following:	
Siri Kambam				
		Name of Person	n	
Priva Mortgage Inc				
		Firm/Company		
6004 Grand Meadow Ln.				
		Address		
Flower Mound, TX 75028	3-4830			
	C	ity/State and Zip	code	
sos@mymortgagelicense.c		10 7	1	
	E-mail address: (to	o be used for fun	ire annual report notif	ication)
For further information	concerning this matte	er, please call:		
Siri Kambam	Name of Person Area Code Daytime Telephone Number			
Name of Person	1	Area Code	Daytime Telephone	e Number
Registration Sec Division of Corp The Centre of Ta	oorations allahassee : Street, Suite 810		MAILING ADD Registration Section Division of Corpo P.O. Box 6327 Tallahassee, FL 3	on rations
Enclosed is a check for the Please make check payable \$70.00 Filing Fee		RTMENT OF ST $e \& \square \$78.7$		\$87.50 Filing Fee, Certificate of Status & Certified Copy

# 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. Pi	riva Mortgage	Inc				
(E		orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	D," "COMPANY," "CORPORATIO	۷,"		_
(If	name unavail	able in Florida, enter alternate corporate nan	ne adopted for the purpose of transacting	ng business in	Florida)	<u> </u>
T	exas		3			
2. (	State or countr	y under the law of which it is incorporated)	(FEI number, if ap	plicable)		_
. 10	119/2020		5. Perpetual			
4	(Date of incorporation)  5. (Date of duration, if other than perpetual)		)	_		
6. <sup>01</sup>	1/14/22	•				
0			s in Florida, if prior to registration) .1502, F.S., to determine penalty liabili	ty)		_
7 600	4 Grand Mead	low Ln., Flower Mound, TX 75028-4830		: _	·~ 1	_
··		(Principal o	ffice street address)		:3	,
		(Current mai	ling address, if different)		29	
o Nia	uma and stree	et address of Florida registered agent: (P	O Roy NOT acceptable)		) PH	
0. 148	nne and <u>succ</u>	Paracorp Incorporated	.O. Box <u>1101</u> acceptable)	 ਸਮੁਤੀ	2: 2	-
	Name:		<del></del>		22	
Office	e Address:	155 Office Plaza Drive, 1st Floor				
		Tallahassee	, Florida 32301 (Zip code)			
		(City)	(Zip code)			
Havir design furthe	ng been nam nated in this er agree to co	ent's acceptance:  ed as registered agent and to accept ser  application, I hereby accept the appoin  amply with the provisions of all statutes  with and accept the obligations of my p	tment as registered agent and agre relative to the proper and complet	e to act in th	iis capa	icity. I
		See Attached				
		(Registered agent's	signature)			
10. A	ttached is a c	ertificate of existence duly authenticated	d, not more than 90 days prior to de	livery of this	applic	ation to

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

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

A. DIRECTORS					
□Chairman	Name:	□ Chairman	Name:		
□Vice Chairman	6004 Grand Meadow Ln. Address:	□Vice Chairman	Address:		
<b>■</b> Director	Flower Mound, TX 75028-4830	Director	Flower Mound, TX 75028-4830		
President		□President			
□Vice President		■Vice President			
Secretary	☐Treasurer	Secretary	<b>■</b> Treasurer		
□ Other	Other	Other	Other		
□ Chairman	Name:	□Chairman	Name:		
☐ Vice Chairman	Address:	□Vice Chairman	Address:		
□Director		□Director			
□President		□President			
□Vice President		□Vice President			
☐ Secretary	☐Treasurer	☐ Secretary	□Treasurer		
Other	Other	□Other	Other		
Chairman	Name:	□Chairmaπ	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
□Director		Director			
□President		□President			
□Vice President		□Vice President			
Secretary	Treasurer	☐ Secretary	□Treasurer		
Other	Other	Other	□Other		
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.  12. 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.  Siri Kambam, Vice President					

#### STATE OF FLORIDA

#### REGISTERED AGENT CONSENT FORM

DATE: 12/29/2021

ENTITY NAME: Priva Mortgage Inc

#### REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statues.

Leticia Herrera, Assistant Secretary

Paracorp Incorporated

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



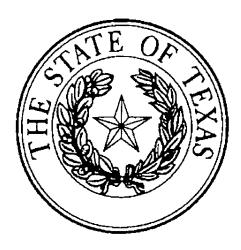
# Office of the Secretary of State

#### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Priva Mortgage Inc (file number 803799902), a Domestic For-Profit Corporation, was filed in this office on October 18, 2020.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on December 23, 2021.



John B. Scott Secretary of State

Fax: (512) 463-5709 TID: 10264 Dial: 7-1-1 for Relay Services Document: 1105324600002

Phone: (512) 463-5555 Prepared by: SOS-WEB