

Number Only
F96000001126

C T CORPORATION BYLAWS

Requester's Name
 660 East Jefferson Street

Address
 Tallahassee, Florida 32301

City State Zip Phone
 904-222-1092

CORPORATION(S) NAME

11111111111111111111
 11111111111111111111
 *****70,100 *****70,100

_____ *W96-497*

_____ *Midwest Financial Services, Inc.*

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> NonProfit | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input checked="" type="checkbox"/> Foreign | <input type="checkbox"/> Reservation | <input type="checkbox"/> Change of R.A. |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Photo Copies | <input type="checkbox"/> Fictitious Name |
| <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call if Problem |
| <input type="checkbox"/> Certified Copy | <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Mail Out | <input type="checkbox"/> After 4:30 PM |
| <input checked="" type="checkbox"/> Walk In | | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

Name
Availability
Document Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

1/8/96
3.00

PLEASE RETURN EXTRA COPY(S)
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 JAN - 8 11 10
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 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 95 PM - 5 PM 1:29



FLORIDA DEPARTMENT OF STATE
Bandra B. Morton
Secretary of State

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CORPORATIONS
JAN 10 1990

January 8, 1990

CT COMP

SUBJECT: MIDWEST FINANCIAL SERVICES, INC.
Ref. Number: W96000000497

We have received your document for MIDWEST FINANCIAL SERVICES, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

J. L. A
~~_____~~
Granite Mortgage
Smoos Corp

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6093.

10: Freta Lott
Corporate Specialist Supervisor

Letter Number: 196A00000807

Walk-in
Pick-up 3:00
3-596

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CORPORATIONS
JAN 10 1990



FLORIDA DEPARTMENT OF STATE
Sandra H. Northam
Secretary of State

March 1, 1998

CT CORP

SUBJECT: MIDWEST FINANCIAL SERVICES, INC.
Ref. Number: W96000000497

FILED
SECRETARY OF STATE
CORPORATION DIVISION
62 APR 5 PM 1:29

We have received your document for **MIDWEST FINANCIAL SERVICES, INC.** and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

The name you have chosen to adopt in Florida is also unavailable. You will need to choose another name for adoption, verify with our office that the new name is available, correct your resolution and resubmit for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6093.

Freta Lott
Corporate Specialist Supervisor

Letter Number: 496A00009277


RESOLUTION OF BOARD OF DIRECTORS

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SECRETARY
DEPARTMENT OF REVENUE
95123-5 PM 1:29

I, the undersigned, Harold J. Effron, do hereby certify that this Resolution of the Board of Directors of Midwest Financial Services, Inc., a corporation duly organized and existing under the laws of the State of Indiana, was duly adopted on December 7th, 1995.

Resolved, that Midwest Financial Services, Inc., organized and existing in the State of Indiana, hereby adopts the name Granite Mortgage Services Corp. for use in Florida.

Dated: December 7th, 1995.



Signature of Director(s)
Harold J. Effron, Vice-President

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION
TRANSACT BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1603, FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE
STATE OF FLORIDA:

MIDWEST FINANCIAL SERVICES, INC.

1. _____
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or
words or abbreviations of like import in language as will clearly indicate that it is a corporation instead
of a natural person or partnership if not so contained in the name at present.)

2. LAKE COUNTY, STATE OF INDIANA
(State or country under the law of which it is incorporated)

3. 35-1538435
(FEI number, if applicable)

4. 1-21-91 B. PERPETUAL
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. NOT UNTIL LICENSED / Upon Qualification
(Date first transacted business in Florida. (See sections 607.1601, 607.1602 and 817.160, F.S.))

MIDWEST FINANCIAL SERVICES INC.

7. 1205 W. LINCOLN HWY., SUITE 7, MERRILLVILLE IN 46410
DATA ATLANTIC MORTGAGE SERVICES
6242 WEST OAKLAND PARK BLVD., SURFIDE, FL 33313
(Current mailing address)

8. MORTGAGE BANKER & MORTGAGE BROKER RESIDENTIAL REAL ESTATE
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of
Florida)

9. Name and street address of Florida registered agent:

Name: C T CORPORATION SYSTEM

Office Address: c/o C T Corporation System, 1200 South Pine Island Road

Plantation, Florida, 33324
(Zip Code)

10. Registered agent 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.

C T CORPORATION SYSTEM

[Signature]
(Registered agent's signature) (Officer)

Jeffrey R. Craven, Asst. Secy.
(Type Name and Title of Officer)

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CORPORATION STATE
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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.

12. Names and addresses of officers and/or directors:

A. DIRECTORS

Chairman: ISA K. MUSHANWAR

Address: 1705 W. Lincoln Hwy, Suite 7
MERCERSBURG IN 46040

Vice Chairman: _____

Address: _____

Director: HAROLD J. EEBROW

Address: 32 TERRACE CT
CARMEL IN 46032

Director: GEORGE M. KALLAS

Address: 2943 EVELYN ST
POTTSVILLE IN 46364

B. OFFICERS

President: ISA K. MUSHANWAR

Address: _____

Vice President: HAROLD J. EEBROW

Address: _____

Secretary: GEORGE M. KALLAS

Address: _____

Treasurer: HAROLD J. LEEFREN
Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. [Signature]
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. HAROLD J. LEEFREN VICE PRESIDENT
(Typed or printed name and capacity of person signing application)

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COMM. DIV.
MAY 11 1969

STATE OF INDIANA
OFFICE OF THE SECRETARY OF STATE

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, RUE ANNE GILROY, 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 the proper official to execute this certificate.

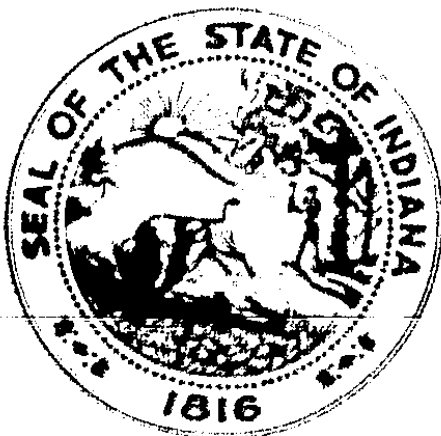
I further certify that records of this office disclose that

MIDWEST FINANCIAL SERVICES, INC.

filed Articles of Incorporation on July 29, 1991, and is a corporation duly organized and existing under and by virtue of the laws of the State of Indiana.

I further certify this corporation has filed its most recent annual report required by Indiana law with the Secretary of State, or is not yet required to file such annual reports, and that Articles of Dissolution have not been filed.

SECRET
OFFICE OF THE SECRETARY OF STATE
INDIANAPOLIS, INDIANA
JAN 5 5 11:29 PM '96



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the City of Indianapolis, this Fifth day of January, 1996.

Rue Anne Gilroy

RUE ANNE GILROY, Secretary of State

[Signature]
Deputy