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Horneys' Title Insurance 660 E. Jefferson Street Suite 200 Tallahassee, Fl 32301

SECRETARY OF STATE OF CORPORATIONS

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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:

2. Georgia 3. 58-1939173  (State or country under the law of which it is incorporated) (FEI number, if applicable)  4. 3-25-91 5. (Date of incorporation) (Duration: Year corp. will coase to exist or "perpetual" (Date of incorporation) (Date of in	istato     Sec
4. 3-25-91 5. (Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual"  6. 4-18-96	istato 1 Sec
6. 4-18-96 (Dem first transacted business in Florida. (See sections 207.1501, 607.1507, and 217.156, F.S.)  7. 1800 Lake Park Drive, Suite 100  Smyrna, Georgia 30080 (Current mailing address)	SECATO SEC
6. 4-18-96 (Dem first transacted business in Florida. (See sections 207.1501, 607.1507, and 217.156, F.S.)  7. 1800 Lake Park Drive, Suite 100  Smyrna, Georgia 30080 (Current mailing address)	JISTATO Jes
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Smyrna, Georgia 30080 (Current mailing #ddress)	三世
(Current mailing address)	
(Current mailing eddress)  B. Servicing Manager for Florida Trust  (Purposels) of corporation authorized in home state or country to be carried out in the state of Florida)	300
8. Servicing Manager for Florida Trust (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)	Sar
(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: Thomas Willoughby	
Office Address: 2239 Coventry Drive	
Winter Park, FL , Florida, 32792	

#### 10. 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 famillar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

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 others a	nd/or directors:
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### A. DIRECTORS

	Chalrmon: _	Donald A. Waglay
	Address: _	4503 Brookwood Drive
		Mableton, Georgia 30059
		nan;
	, 4101000. p.	
	Director:	Donald A. Wagley
	Address:	4503 Brookwood Drive
		Mableton, Georgia 30059
		Princilla J. Granese
		4503 Brookwood Drive
		Mableton, Georgia 30059
В.	OFFICERS	
		D==13
		Donald A. Wagley
	Address:	4503 Brookwood Drive
		Mableton, Georgia 30059
	Vice Preside	ent Priscilla J. Granese
	Address:	4503 Brookwood Drive
	•	Mableton, Georgia 30059
	Secretary:	Priscilla I. Granoso
		4503 Brookwood Drive
		Mableton, Georgia 30059
	Treasurer:	Priscilla J. Granese
	Address:	4503 Brookwood Drive
		Mableton, Georgia 30059

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

13. (Signature of Chairman, Vice Chairman or any officer listed in number 12 of the application)

14. Donald A. Wagley, Chairman
(Typed or printed name and capacity of person signing application)

# Pecretary of State Rusiness Information and Services Control number Control numbe

DOCKET NUMBER : 961080777
CONTROL NUMBER : 9105228
DATE INC/AUTH/FILED: 03/25/1991
JURISDICTION : GEORGIA
PRINT DATE : 04/17/1996
FORM NUMBER : 0211

SCHNADER, HARRISON, SEGAL & LEWIS ONE PEACHTREE CENTER 303 PEACHTREE ST. N.E. ATLANTA, GA 30308

#### CERTIFICATE OF EXISTENCE

I, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

#### GAW ASSET MANAGEMENT, INC. A DOMESTIC PROFIT CORPORATION

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the abovenamed entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



Jewis A. Massey

LEWIS A. MASSEY

SECRETARY OF STATE