F9800000000515

To: Qualification/Tax Lien Section Division of Corporations	
SUBJECT: TWINS Mortgage Corp. (Name of corporation - must include suffix)	<u> </u>
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Business is "Certificate of Existence", and check are submitted to register the above referenced foreign transact business in Florida.	corporation to
	5986856 9801041003
Teri Cannina ******7	8.75 *****78.75
(Name of Person)	
TWING Mortgage Corp (Firm/Company)	p12/1
	98 S
4406 NW 105Th Way	SECRI VISION 98 DEC
(Address)	7 = 7
gainesville FL 32653	RECORD OF THE PROPERTY OF THE
(City/State/Zip)	EO OF STATE ORATION 43
Should you need to call someone concerning this matter, please call:	ATE ATTONS
Tori Canning at 352,372-3452	
(Name of Person) (Area Code & Daytime Telephone Numb	er)

STREET ADDRESS:

Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

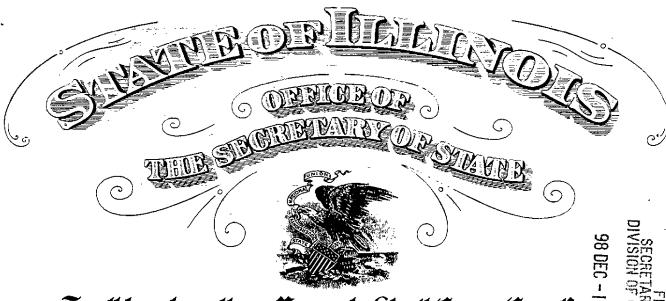
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.
1. TWING MOTTOWC COPP. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. IIIINO16 (State or country under the law of which it is incorporated) 3. 36-3817351 (FEI number, if applicable)
4. Movch 20, 1992 5. perpetual. (Duration: Year corp. will cease to exist or "perpetual")
6. C5TMCTING 115 G9 (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 4906 NW 155th WOU 8 55
Samesville, FL 32653 (Current mailing address)
o A B
8. Mortgoog Orokov (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: Teri Canning
Office Address: 4900 NW 105Th Way
Gainesville, Florida, 321053 (Zip code)
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 familiar with and accept the obligations of my position as registered agent.
Seu Canning
(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 officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)
A. DIRECTORS (Street address only - P.O. Box NOT acceptable)
Chairman: Teri Conning
acon a visit of the later
Jainesuille, FL 321053
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS (Street address only - P.O. Box NOT acceptable)
CHELLOW CHOICE
AND NIN INSTA INOLA
gainesuille, FL 32653
Tari
Vice President: 101 0V IV IV IV
Address: 4900 NW 1050 WOU
garresulle, FL 50055
Secretary: NOT COMMING
Address: 50MC 05 0bovC
Treasurer: Ten Conning
Address: 50MC 35 above
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. Jeu Cannins
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. Jen Canning, VP
(Typed or-printed name and capacity of person signing application)

File Number 5676-400-3



To all to whom these presents Shall Come, Greeting:

I, George H. Ryan, Secretary of State of the State of Illinois,

do hereby certify that TWINS MORTGAGE CORP., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE MARCH 20, 1992, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE FILING OF ANNUAL REPORTS AND PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS***

EXPELM SELE SECRETARY OF STATE

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Y	MCG	261H	18	7		
	2014		<b>~</b>			_

In Testimony Whereof,	Ī	hereto	set

my hand and cause to be affixed the Great Seal of

the State of Illinois this _____5TH

day of _____OCTOBER  $\mathscr{A}.\mathscr{D}., 19$  98

George H Ryan SECRETARY OF STATE