TRANSMITTAL LETTER To: Qualification/Tax Lien Section Division of Corporations . SUBJECT: Peach State Mortgage Corp. (Name of corporation - must include suffix) Dear Sir or Madam: The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida. Please return all correspondence concerning this matter to the following: 800002828088--3 -04702/99--01077--003 *****70.00 *****70.00 Jerry B. Sanders (Name of Person) Peach State Mortgage Corp. (Firm/Company) 2799 Delk Road (Address) Marietta, GA. 30067 (City/State/Zip) Should you need to call someone concerning this matter, please call: Jerry B. Sanders 770 933-0137 at ((Name of Person) (Area Code & Daytime Telephone Number) STREET ADDRESS: **MAILING ADDRESS:** Qualification/Tax Lien Section Qualification/Tax Lien Section Division of Corporations Division of Corporations 409 E. Gaines St. P.O. Box 6327 Tallahassee, FL 32399 Tallahassee, FL 32314 Enclosed is a check for the following amount: **X** \$70.00 Filing Fee □ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certificate of Status Certified Copy 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.

	(Name of corpora words or abbrevia	te Mortgage tion; must includ- ations of like importmership if not	e the word "INCO ort in language as	will c	learly indica	ite that it i	Y", "COR	PORATIOn inst	ON" or ead of a		-	
2.	GA				_ 3	582053		ber, if app				
	(State or country	under the law of v	which it is incorpo	orated)			(ԲԵԼ ոստ	ber, it app	nicanie)			
4.	6/15/93			5		PERPET				400	- .	
	(Date	of incorporation))		(Duration:	Year cor	p. will cea	ise to exis	t or perp	etual")		
6.	TBD											
v.	(Date first	transacted busines	ss in Florida.) (SI	E SEC	CTIONS 607	.1501, 60	7.1502 an	d 817.155	, F.S.)			
7.		Sate Mortgage							-			
	2799 De	elk Road, Ma	rietta Ga.	30067	7		<u></u>		- _		_	
(Current mailing address)												
8.		ge Originati									_	
•	(Purpose(s) of corporation a	uthorized in hon	ie state	or country	to be carri	ied out in	state of Fl	orida)	و	eng.	
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)												
	Name:	Betty S. I	Holliday		1112	_				. 2	7 T	
o	ffice Address:	2107-Siste	ers-Welcome	Road	BOX 0	12 136			<u></u>		20 20	
		Lake City				Florida,	32025	32024 ——	1	5.5	E H	
		,					(Zip cod	le)			荡	

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.

(Registered agent's signature)

Betty S. Hollidayay

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.

ddress:	•	-	
ce Chairman: ddress: irector: ddress: ddress:	•	_	
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. OFFICERS (Street address only - P.O. Box NOT acceptable)			
. OFFICERS (Street address only - P.O. Box NOT acceptable)			
•			
esident: Jerry B. Sanders, President/Owner			
		=	
ddress: 2799 Delk Road, Marietta GA. 30067			99 / SE
ice President:			PR -2
ddress:			NA 7:
ecretary:		_	57 gg
ddress:			
reasurer:			
.ddress:			
NOTE: If necessary, you may attach an addendum to the application listing add	litional officers and	or directors.	
13. (Signature of Chairman, Vice Chairman, or any officer listed in	number 12 of the a	polication)	

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

Secretary of State

Corporations Division 315 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 DOCKET NUMBER : 983010628 SEE
CONTROL NUMBER 98 1979313737
DATE INC/AUTH/FILED: 06/15/199326
JURISDICTION GEORGIA
PRINT DATE SECRETAIN FORM NUMBER : 211

PEACH STATE MORTGAGE CORP. 2799 DELK ROAD MARIETTA GA 30067

CERTIFICATE OF EXISTENCE

I, Lewis A. Massey, the Secretary of State of the State of Georgia, certify under the seal of my office that

PEACH STATE MORTGAGE CORP.
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 above-named 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