

F99 000004533

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: PROVIDENCE FINANCIAL SERVICES, INC
(Name of corporation - must include suffix)

800002935338--2
-07/19/99-01125-004
*****87.50 *****87.50

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:

GERALD SAMBAER
(Name of Person)
PROVIDENCE FINANCIAL SERVICES, INC
(Firm/Company)
500 NORTH HOMER ST
(Address)
LANSING, MI 48912
(City/State/Zip)

FILED
99 AUG 30 AM 8:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Should you need to call someone concerning this matter, please call:

GERALD SAMBAER
(Name of Person)

at (517) 324-1800
(Area Code & Daytime Telephone Number)

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

F99-4533

Name	9-1
Availability	
Document	
Exemption	
Updater	
Undated	
Verification	
Acknowledgment	
W. P. Vermyer	

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

July 28, 1999

GERALD SAMBAER
500 NORTH HOMER STREET
LANSING, MI 48912

SUBJECT: PROVIDENCE FINANCIAL SERVICES, INC.
Ref. Number: W99000017505

SECRETARY OF STATE
111 MARSHALL BLVD.
TALLAHASSEE, FL 32399

99 AUG 30 AM 8:30

FILED

We have received your document for PROVIDENCE FINANCIAL SERVICES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

A photocopy of a certified copy is not acceptable.

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 (850) 487-6020.

Tammi Cline
Document Specialist

Letter Number: 099A00038542

FILED
29 AUG 30 AM 8:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

August 11, 1999

PROVIDENCE MORTGAGE AND FINANCIAL SERVICES, INC.
500 NORTH HOMER STREET
LANSING, MI 48912

FILED
00 AUG 30 AM 9:30
SECRETARY OF STATE
TAMMI CLINE

We have received your document for PROVIDENCE MORTGAGE AND FINANCIAL SERVICES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

A certified copy of the articles of incorporation is not acceptable. On #6 n/a can not be listed if you have not transacted business in Florida to date you must list upon qualification.,

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 (850) 487-6020.

Tammi Cline
Document Specialist

Letter Number: 899A00040584

FILED

29 AUG 30 AM 8:30

SECRETARY OF STATE
OF FLORIDA

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

FILED
29 AUG 30 AM 9:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, the undersigned GERALD SAMBAEK, do hereby certify
(Name)

that this Resolution of the Board of Directors of _____
PROVIDENCE FINANCIAL SERVICES, INC.
(Corporate Name)

a corporation duly organized and existing under the laws of the State of MICHIGAN,

was duly adopted on August 4th, 19 99.

Be it resolved, that PROVIDENCE FINANCIAL SERVICES, INC.,
(Corporate Name)

organized and existing in the State of MICHIGAN, hereby adopts the name

PROVIDENCE MORTGAGE AND FINANCIAL SERVICES, INC. for use in Florida.

Dated: 8/4/99



Signature of either Chairman, Vice Chairman or any officer

GERALD SAMBAEK, CFO/TREASURER
Type or print name

**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. PROVIDENCE FINANCIAL SERVICES, INC.
(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. MICHIGAN
(State or country under the law of which it is incorporated)
3. 38-3476523
(FEI number, if applicable)
4. JUNE 28, 1999
(Date of incorporation)
5. PERPETUAL
(Duration: Year corp. will cease to exist or "perpetual")
6. UPON QUALIFICATION
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 500 NORTH HOMER STREET
LANSING, MI 48912
(Current mailing address)
8. MORTGAGE LENDER / BROKER
(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: Shannon Vecchio
Office Address: 208 Jupiter Woods Dr.
Jupiter, FL, Florida, 33458
(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.

Shannon Vecchio
(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: WILLIAM J. HUFNAGEL

Address: 500 NORTH HOMER ST.
LANSING MI 48912

Vice Chairman: TIMOTHY J. SAMBAER

Address: 500 NORTH HOMER ST.
LANSING MI 48912

Director: GERALD SAMBAER

Address: 500 NORTH HOMER ST.
LANSING MI 48912

Director: _____

Address: _____

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92 AUG 30 AM 8:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: WILLIAM J. HUFNAGEL

Address: 500 NORTH HOMER ST
LANSING MI 48912

Vice President: TIMOTHY J. SAMBAER

Address: 500 NORTH HOMER ST
LANSING MI 48912

Secretary: TIMOTHY J. SAMBAER

Address: 500 NORTH HOMER ST
LANSING MI 48912

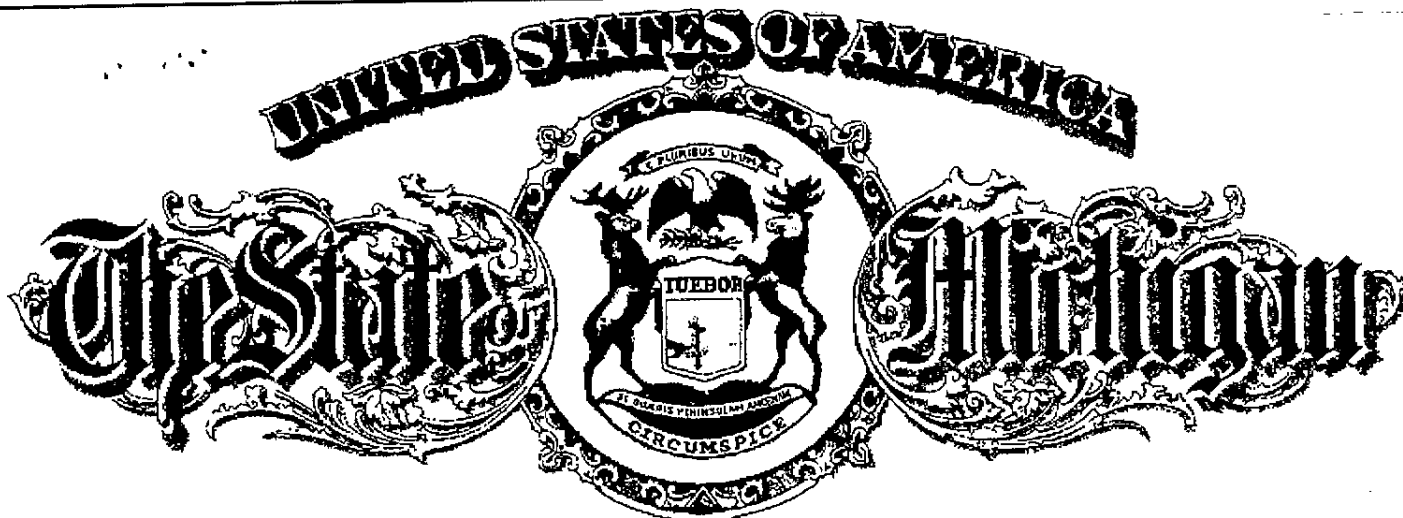
Treasurer: GERALD SAMBAER

Address: 500 NORTH HOMER ST
LANSING MI 48912

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

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

14. GERALD SAMBAER, TREASURER
(Typed or printed name and capacity of person signing application)



Michigan Department of Consumer and Industry Services

Lansing, Michigan

This is to Certify That

PROVIDENCE FINANCIAL SERVICES, INC.

*was validly incorporated on June 28, 1999, as a Michigan profit corporation,
and said corporation is validly in existence under the laws of this State.*

*This certificate is issued to attest to the fact that the corporation is in good standing
in this office as of this date and is duly authorized to transact business or conduct
affairs in Michigan and for no other purpose. It is in the usual form, made by me
as the proper officer, and is entitled to have full faith and credit given it in every
court and office within the United States.*

*In testimony whereof, I have hereunto set my
hand and affixed the Seal of the Department,
in the City of Lansing, this 24th day
of August, 1999.*

Julie Croll

, Director

173 0445772

Corporation, Securities and Land Development Bureau