

CSO THE UNITED STATES CORPORATION COMPANY
M000000001565

ACCOUNT NO. : 072100000032

REFERENCE : 787914 4320777

AUTHORIZATION : .

COST LIMIT : \$ PREPAID

ORDER DATE : August 4, 2000

ORDER TIME : 10:25 AM

ORDER NO. : 787914-005

CUSTOMER NO: 4320777

600003349356-4
-08/08/00-01044-006
****125.00 ****125.00

CUSTOMER: Ms. Tasha Thompson
Kirkpatrick & Lockhart, LLP
1800 Massachusetts Ave., N.W.
Second Floor
Washington, DC 20036-1800

FILED
00 AUG -8 PM 1:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FOREIGN FILINGS

NAME: PARTNERSHIP MORTGAGE, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Darlene Ward

RECEIVED
00 AUG -8 PM 12:10
DIVISION OF CORPORATION

M00-1565

Name	08-8
Address	
City	
State	
Zip	
Signature	
Witness	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACTION BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. Partnership Mortgage, LLC (Name of foreign limited liability company)
2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized)
3. 59-3653478 (FEI number, if applicable)
4. August 4, 2000 (Date of Organization)
5. (Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon Qualification (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 4043 Tampa Road, Suite 2800
Oldsmar, Florida 34667 (Street address of principal office)
8. If limited liability company is a manager-managed company, check here ☒
9. The usual business addresses of the managing members or managers are as follows:
See attached list of managers and management committee members
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: Mortgage Brokerage Business

Harold I. Brooks
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

HAROLD I. BROOKS

Typed or printed name of signee

SUNTRUST MORTGAGE, INC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES,
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE
STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Partnership Mortgage, LLC

2. The name and the Florida street address of the registered agent and office are:

Corporation Service Company

(Name)

1201 Hays Street

Florida street address (P.O. Box NOT ACCEPTABLE)

Tallahassee,

FL

32301

City/State/Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.


(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

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TALLAHASSEE, FLORIDA

PARTNERSHIP MORTGAGE, LLC

MANAGER

Manager/Title/DOB	Social Security	Residence Address	Business Address/Phone
Harold I. Brooks Manager D.O.B. 2/2/42	[REDACTED]	6005 Brentmoor Drive Glen Allen, Virginia	901 Semmes Avenue Richmond, Virginia 23260

MEMBERS

Members/Title/DOB	Federal Tax ID/Social Security Number	Ownership Interest	Business Address
SunTrust Bank Member	[REDACTED]	51%	401 E. Jackson Street RRE 10 th Floor Tampa, Florida 33602
Peter Gillen Timba Member D.O.B. 6/23/55	[REDACTED]	24.5%	4023 Tampa Road Suite Number 2800 Oldsmar, Florida 34677
Kenneth Russell Emery Member D.O.B. 6/21/42	[REDACTED]	24.5%	4023 Tampa Road Suite Number 2800 Oldsmar, Florida 34677

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PARTNERSHIP MORTGAGE LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTH DAY OF AUGUST, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.




Edward J. Freel, Secretary of State

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AUTHENTICATION:

0601557

DATE:

08-04-00