CT CORPORATION SYSTEM

M01000 0/55

CitiFinancial Mortagge Comp	oany, LLC	
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() Profit () Nonprofit	() Amendment	() Merger
() Foreign	() Dissolution/Withdrawal () Reinstatement	() Mark
() Limited Partnership	() Annual Report () Name Registration () Fictitious Name	() Other () Change of RA () UCC TOUS
Certified Copy	() Photocopies	COUS INC. OB SEC.
() Call When Ready (x) Walk In () Mail Out	() Call If Problem () Will Wait	() After 4:30 (x) Pick Up
Name Availability	7/12/01	Order#: 4527989
Document Examiner Updater Verifier	, MS	Ref#:FLORIDA
W.P. Verifier	- -	Amount: \$

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222_7615

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

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

ware diction under the law of which foreign limited liabi any is organized) / 18, 2001 (Date of Organization)	3_52-2320911 (FEI number, if applicable) 5. perpetual	,,,,
diction under the law of which foreign limited liabi any is organized) / 18, 2001	lity (FEI number, if applicable)	
(Date of Organization)	s nemetial	
(Date of Organization)		
	(Duration: Year limited liability company exist or "perpetual")	will cease to
n qualification		
	. (See sections 608.501, 608.502, and 817.155, F.S.))
St. Paul Place		
imore, Maryland 21202		
(Street ad	dress of principal office)	
mited liability company is a manager-mana usual business addresses of the managing		OI JUL 12 SECRLTARY TALLAHASS
St. Paul Place		
imore, Maryland 21202		PM 1:50 CF STATE E.FLORIDA
iction under the law of which it is organized. (A photon of the certificate under oath of the translator must be	an 90 days old, duly authenticated by the official having tocopy is not acceptable. If the certificate is in a foreign e submitted.) ed or promoted in Florida: Consumer lending	n language, a
Tensa M	1 Que	·

Teresa M. Bær, Assistant Secretary to CitiFinancial Mortgage Company, Inc. (Member)

Typed or printed name of signee

(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.)

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.

FLORIDA.		
1. The name of the Limited Liabil	ity Company is:	
CitiFinancial Mortgage Company,m LL	C	-
2. The name and the Florida street	t address of the registered agent and office a	re:
CT Corporation Syste	em	
	(Name)	OI JU SECRI TALLA
c/o C T Corporation S	ystem, 1200 South Pine Island Road	AZI L
Florida	street address (P.O. Box NOT ACCEPTABLE)	2 PM I
Plantation	FL 33324	

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.

City/State/Zip

CT Corporation System

Acthyr A Willow Special Assistant Secretary
(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

State of Delaware

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Office of the Secretary of State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CITIFINANCIAL MORTGAGE COMPANY, 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 ELEVENTH DAY OF JULY, A.D. 2001.

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

OI JUL 12 PM 1:50
SECRETARY OF STATE
ALL ABASSEF, FLORIDA



Warriet Smith Windson, Secretary of State

AUTHENTICATION: 1236439

DATE: 07-11-01

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