Direct Home Capital, LLC		
0		
· · · · · · · · · · · · · · · · · · ·		100 SED 100 SE

		AN III S
		10 =
		<u> </u>
		<u> </u>
		•
() Profit	() Amendment	() Merger
() Nonprofit		
() Foreign	() Dissolution/Withdrawal	() Mark
	() Reinstatement	
() Limited Partnership	() Annual Report	() Other
(x) LLC registration	() Name Registration	() Change of RA
	() Fictitious Name	() ucc
(x) Certified Copy	() Photocopies	() Other () Change of RA () UCC () CUS () CUS () After 4:30 (x) Pick Up Order#: 4751965 0 0
() Call When Ready	() Call If Problem	() After 4:30
(x) Walk In	() Will Wait	(x) Pick Up
() Mail Out	() 1122 11 22	
		B IS
Name	9/18/01	Order#: 4751965 🙃 😂
Availability		ennnn45982364
Document		6000045982364 -09/19/0101037018
Examiner		Ref#: ****130.00 ****130.00
Updater		6000045982364
Verifier		-09/19/0101037019
W.P. Verifier		Amount: \$ *****25.00 *****25.00

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

0/10/0/

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:

1.	DIRECT HOME CAPITAL LLC					
	(Name of foreign limited liability company)					
2.	DELAWARE 3. APPLIED FOR isdiction under the law of which foreign limited liability (FEI number, if applicable)					
(Jur	isdiction under the law of which foreign limited liability (FEI number, if applicable) upany is organized)					
4	(Date of Organization) 5. PERPETUAL (Duration: Year limited liability company will cease to					
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")					
6	UPON FILING					
	(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)					
7						
	21.4					
	(Street address of principal office)					
8. If	BATON ROUGE, LA 70809 (Street address of principal office) (Street address of principal office)					
9. Th	ne usual business addresses of the managing members or managers are as follows:					
_	10093 JEFFERSON HWY.					
	BATON ROUGE, LA 70809					
<u></u>	· · · · · · · · · · · · · · · · · · ·					
he juri:	tached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recor soliction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a ion of the certificate under oath of the translator must be submitted.)					
	fature of business or purposes to be conducted or promoted in Florida:					
	•					
	ANY LAWFUL ACT OR ACTIVITY					
	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.)					
	ROMAN KOWALEWSKI					
	Typed or printed name of signee					

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 Liabilit	y Company is:	
Direct Home Capital LLC		
2. The name and the Florida street a	address of the registered agent and office are:	
C T Corporation System		
· 	(Name)	Tit in
c/o C T Corporation Sys	tem, 1200 South Pine Island Road	T SEPTEMBER AND A REPORT AND A
Florida se	reet address (P.O. Box_NOT ACCEPTABLE)	್ಹ್ − - ಗ್ನ+
Plantation	FL 33324	
	City/State/Zip	II: 38
		0 A

Having been pamed 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..

PETER F. SOUZA
(Signature) ASSISTANT SECRETARY

\$ 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 Office of the Secretary of State PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DIRECT HOME CAPITAL 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 EIGHTEENTH DAY OF SEPTEMBER, A.D. 2001.

OI SEP 19 AMII: 38



Darriet Smith Windson Secretary of State

AUTHENTICATION: 1346105

DATE: 09-18-01

3429542 8300

010458786