



*Altara Home Mortgage, LLC*  
*There's no place like home....*

26 North Main Street  
Wallingford, CT 06492  
Phone: 203-626-0150  
Fax: 203-626-0112

**MO2000002177**

August 14, 2002

Florida Department of State  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

200007205892--6  
-08/19/02--01081--005  
\*\*\*\*160.00 \*\*\*\*160.00

Attention: Registration Section

AL

As per your requirements, the completed application and accompanying required documentation for Altara Home Mortgage, LLC to transact business in Florida is enclosed. In addition, a check for the Filing Fee, Designation of Registered Agent, Certified Copy, and Certificate of Status is also included.

The "Certificate of Existence" which the Office of the Secretary of the State of Connecticut has issued, is also provided within this packet.

Should you require any additional information or have questions, please feel free to contact me directly at (203) 626-0101.

Sincerely,

William T. Forte  
Manager

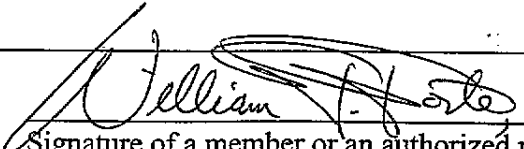
FILED  
02 AUG 19 AM 11:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



**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. Altara Home Mortgage, LLC  
(Name of foreign limited liability company)
2. Connecticut 3. 01-0725856  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. 6/17/02 5. "Perpetual"  
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. To be conducted upon issuance of license  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. Connecticut - 26 North Main Street, Wallingford, CT 06492  
Florida - 5150 Gulf of Mexico Drive, Longboat Key, FL 34228-2006  
(Street address of principal office)
8. If limited liability company is a manager-managed company, check here ☒
9. The name and usual business addresses of the managing members or managers are as follows:
- William T. Forte, Manager  
26 North Main Street, Wallingford, CT 06492
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: Residential Mortgages

 MEMBER  
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.)  
William T. Forte, Member  
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 Liability Company is:

ALTARA HOME MORTGAGE, LLC

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

HUBERT STEENBAKKERS

(Name)

5150 GULF OF MEXICO DRIVE

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

LONGBOAT KEY, FL 34228-2006

(City/State/Zip)

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TALLAHASSEE, FLORIDA

*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)

SECRETARY OF THE STATE  
30 TRINITY STREET  
P.O. BOX 150470  
HARTFORD, CT 06115-0470

AUGUST 15, 2002

WILLIAM T. FORTE  
ALTARA HOME MORTGAGE LLC  
26 NORTH MAIN STREET  
WALLINGFORD, CT 06492

RE: Request for Certificate or Copies

Business Name:  
ALTARA HOME MORTGAGE, LLC

Work Order Number: 2002148861-001  
Type of Request: LLC STANDARD CERTIFICATE  
Work Order Payment Received: 25.00  
Payment Received: 25.00  
Account Balance: .00  
Customer Id: 918078

Attached is the information you requested.

SCOTT CAMPANELE  
Commercial Recording Division  
860-509-6004

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State,  
and keeper of the seal thereof, DO HEREBY CERTIFY, that

ALTARA HOME MORTGAGE, LLC

organized under the laws of Connecticut as a Limited Liability Company,  
was filed in this office on June 18, 2002 and is in existence as of  
the date of this certificate.



Secretary of the State

FILED  
02 AUG 19 AM 11:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Date Issued: August 15, 2002