

M04000000535

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

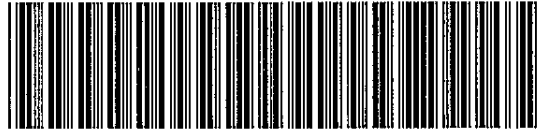
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A large, stylized handwritten signature in black ink, appearing to be 'BPK'.



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032
REFERENCE : 428509 7115859
AUTHORIZATION : *Patricia Pajoto*
COST LIMIT : \$ 130.00

04 FEB -9 PM 4:27
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : February 6, 2004
ORDER TIME : 9:49 AM
ORDER NO. : 428509-035
CUSTOMER NO: 7115859
CUSTOMER: Jana Cochrane
Security National Servicing
323 5th Street
Eureka, CA 95501

FOREIGN FILINGS

NAME: SN COMMERCIAL, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 2956

EXAMINER: _____

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

FILED
04 FEB -9
STATE
TREASURER, FLORIDA
PM 4:27

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. SN COMMERCIAL, LLC
(Name of foreign limited liability company)

2. ALASKA
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 94-3338053
(FEI number, if applicable)

4. 7/26/99
(Date of Organization)

5. PERPETUAL
(Duration: Year limited liability company will cease to exist or "perpetual")

6. FEBRUARY 15, 2004
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))

7. 323 FIFTH STREET
EUREKA, CALIFORNIA 95501
(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:

SECURITY NATIONAL MASTER MANAGER, LLC

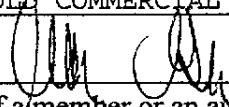
323 FIFTH STREET

EUREKA, CALIFORNIA 95501

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:

TO PURCHASE, OWN AND HOLD COMMERCIAL LOANS.


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.)

ALLAN GRUSHKIN, SECURITY NATIONAL MASTER MANAGER, LLC, ITS MANAGER
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:

SN COMMERCIAL, LLC

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

THE PRENTICE-HALL CORPORATION SYSTEM

(Name)

1201 HAYS STREET

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

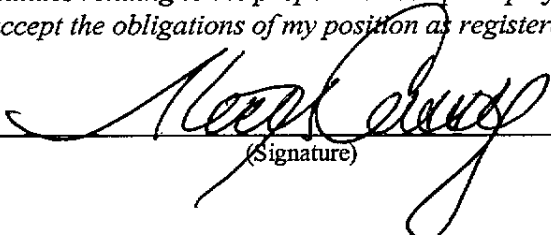
TALLAHASSEE

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)

State of Alaska
Department of Community and Economic Development
Division of Banking, Securities and Corporations

CERTIFICATE
OF
COMPLIANCE

The undersigned, as Commissioner of Community and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby certifies that

SN COMMERCIAL, LLC

on **JULY 26, 1999** filed in this office its Articles of Organization, as a limited liability company organized under the laws of this State.

I FURTHER CERTIFY that said company is in good standing and has filed all biennial reports due at this time and has paid all biennial fees due and payable at this time.

No information is available in this office on the financial condition, business activity or practices of this company.

IN TESTIMONY WHEREOF, I execute this certificate and
affix the Great Seal of the State of Alaska on
February 4, 2004

Edgar Blatchford

Edgar Blatchford
Commissioner of Community
and Economic Development