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| (Red | questor's Name) | |
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| (City | y/State/Zip/Phone | |
| PICK-UP | MAIT WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | | RIL |
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TRANSMITTAL LETTER

| TO: Registration Section Division of Corporations | | |
|--|--|--|
| SUBJECT: Cornerstone Title LLC | | |
| | ne of Limited Liability Company) | |
| | eck are submitted to register the above referenced foreign limited | |
| Please return all correspondence concerni | ng this matter to the following: | |
| Deb Burch | | |
| 200 2001 | (Name of Limited Liability Company) sed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Certificate of Existence, and check are submitted to register the above referenced foreign limited ompany to transact business in Florida arm all correspondence concerning this matter to the following: Deb Burch | |
| | (* ************************************ | |
| Cornerstone Title LLC | | |
| | cate of Existence, and check are submitted to register the above referenced foreign limited by to transact business in Florida. Correspondence concerning this matter to the following: | |
| | | |
| 107 N. State Rd. 135, Suite 301 | | |
| Cornerstone Title LLC (Firm/Company) 107 N. State Rd. 135, Suite 301 (Address) Greenwood, IN 46142 | | |
| | | |
| Greenwood, IN 46142 | | |
| · · · · · · · · · · · · · · · · · · · | (City/State and Zip Code) | |
| For further information concerning this m | natter, please call: | |
| · | | |
| Deb Burch | at (317) 882-2255 X 215 | |
| (Name of Person) | (Area Code & Daytime Telephone Number) | |
| STREET ADDRESS: | MAILING ADDRESS: | |
| Registration Section | Registration Section | |
| Division of Corporations | · · · · · · · · · · · · · · · · · · · | |
| 409 E. Gaines Street | | |
| Tallahassee, Florida 32399 | Tallahassee, Florida 32314 | |
| Enclosed is a check for the following amo | ount: | |
| ☐ \$125.00 Filing Fee ☐ \$130.00 Fil Ce | ing Fee & \$\subseteq\$ \$155.00 Filing Fee & \$\subseteq\$ \$160.00 Filing Fee, Certificate extificate of Status & Certified Copy of Status & Certified Copy | |

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 BY INNESS, IN THE STATE OF FLORIDA:

| Cornerstone Title LLC | - | |
|---|-------------------|---|
| (Name of Foreign Lim | ited Li | ability Company) |
| State of Indiana | 3 | 20-1931911 |
| (Jurisdiction under the law of which foreign limited liab company is organized) | lity . | (FEI number, if applicable) |
| 11-01-04 | 5. | Perpetual |
| (Date of Organization) | | (Duration: Year limited liability company will cease to exist or "perpetual") |
| NA | | |
| (Date first transacted business (See sections 608.501 & 608.50 | in Flor 2 F.S. | ida, if prior to registration.) to determine penalty liability) |
| 107 N. State Rd. 135, Suite 301 | | |
| Greenwood, IN 46142 | • | |
| (Street Ad | dress o | f Principal Office) |
| If limited liability company is a manager-man | aged o | company, check here |
| The name and usual business addresses of the | mana | ging members or managers are as follows: |
| Derrick K. Christy 107 N. State Rd. 135, Suite | 201 G | reenwood, IN 46142 |
| Democre, Office, 101 14. Otale No. 100, Oute | 201, 0 | |
| | | |
| | | 5 |
| | | <u>Şm_o</u> _ |
| | tocopy | ays old, duly authenticated by the official having custody of rec is not acceptable. If the certificate is in a foreign language, a itted.) |
| 1. Nature of business or purposes to be conduct | ed or | promoted in Florida: Title Company: Handle escrow |
| closings, issuance of owner & lender policies, perfe | orm tit | e searches. |
| - Denist 1 | <u>. C</u> | hil |
| (In accordance with section 608.40) | 3(3), F.S | horized representative of a member. S., the execution of this document constitutes ry that the facts stated herein are true.) |
| Derrick K. Christy | F0** | 2-40 |

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.

| | 1.4 (0) 11 () 11 | 6.1 | |
|---------|---|---|------|
| The nar | ne and the Florida street addre | ess of the registered agent and office are: | |
| | Corporation Service | 2 Company | |
| • | , * | (Name) | - 4E |
| | 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, Florida Statutes.

Corporation Service Company

By: Yatal In Patrick Lalar, Asst. Sec. (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 INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

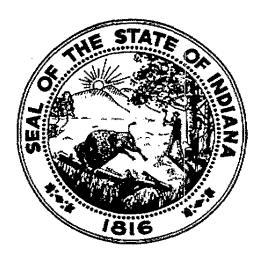
I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

CORNERSTONE TITLE LLC

duly filed the requisite documents to commence business activities under the laws of State of Indiana on November 01, 2004, and was in existence or authorized to transact business in the State of Indiana on December 13, 2004.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Thirteenth Day of December, 2004.

TODD ROKITA, Secretary of State

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