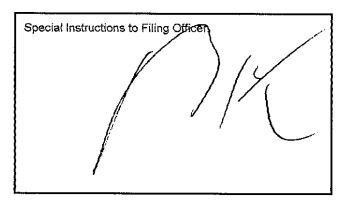
# M05000002109

(	Requestor's Name)				
(Address)					
(	Address)				
	City/State/Zip/Phone #)				
PICK-UP	WAIT MAIL				
(	Business Entity Name)				
	Document Number)				
Certified Copies	Certificates of Status				



Office Use Only



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04/22/05--01040--015 \*\*125.00



CORPDIRECT AGENTS, INC. (formerly CCRS) 103 N. MERIDIAN STREET, LOWER LEVEL TALLAHASSÉE, FL 32301 222-1173

FILING COVER SHEET ACCT. #FCA-14

OS MRA DA PA STO CONTACT: KATIE WONSCH DATE: 04/22/2005 **REF. #:** 000715.37160 CORP. NAME: PRESTIGE HOME MORTGAGE, LLC ( ) ARTICLES OF INCORPORATION ( ) ARTICLES OF AMENDMENT ( ) ARTICLES OF DISSOLUTION ( ) ANNUAL REPORT ( ) TRADEMARK/SERVICE MARK ( ) FICTITIOUS NAME ( ) FOREIGN QUALIFICATION ( ) LIMITED PARTNERSHIP (XX) LIMITED LIABILITY ( ) REINSTATEMENT ( ) MERGER ( ) WITHDRAWAL ( ) CERTIFICATE OF CANCELLATION ( ) OTHER: STATE FEES PREPAID WITH CHECK# 512227 **AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:** COST LIMIT: \$

( ) CERTIFICATE OF GOOD STANDING ( XX ) PLAIN STAMPED COPY

Examiner's Initials

PLEASE RETURN:

( ) CERTIFICATE 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 LIBILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

١.	Prestige Home Mortg			· ·			
		(Name of Foreign Limited	Li	bility Company)			
٠.	Massachusetts		3.	20-2307948			
	(Jurisdiction under the (company is organized)	aw of which foreign limited liability		( FEI number, if applicable)	•		
1.	February 16, 2005		5.				
	(Date of	Organization)		(Duration: Year limited liability company will cease to exist or "perpetual")			
5.	Upon Registration						
[Date first transacted business in Florida, if prior to registration.] (See sections 608.501 & 608.502 F.S. to determine penalty liability)							
7.	. 14 Wood Street						
	Millord, MA 01757						
		(Street Addres	<b>is</b> 0	f Principal Office)			
8	I. 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:							
	John Lucas						
	14 Wood Street						
	Milford, MA 01757						
il tr	ne jurisdiction under the la anstation of the cortificate	nv of which it is organized. (A photoco under oath of the translator must be su	opy ibm	·	nds in		
ł	1. Nature of busines	ss or purposes to be conducted	or	promoted in Florida:			
	Mortgage Lending	John	$\overline{}$	Viv or			
		Un accordance with section 608.408(3) in affirmation under the penalties of p	. F.	horized representative of a member.  5. the execution of this document constitutes  ry that the facts stated herein are true.)			
		John Lucas, Mahager					
		Typed or print	ed	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 Co	ompany is:				
Prestige Hom	e Mortgage LLC	<u> </u>				
2. The name	and the Florida street address	ess of the registered agent and office ar	e:			
	NRAI Services, Inc.	·				
		(Name)				
	2731 Executive Park Drive, Suite 4					
	Florida Street Address (P.O. Box NOT ACCEPTABLE)					
	Weston	FL 33331				
		City/State/Zip	<del></del>			
liability comp agent and agr relating to the obligations of NRAI Service By:	omy at the place designated ree to act in this capacity. I r proper and complete <del>perfo</del> f my position as registered a	and to accept service of process for the ab in this certificate, I hereby accept the ap further agree to comply with the provision rmance of my duties, and I am familiar w gent as provided for in Chapter 608, Flo	pointment as registered ons of all statutes with and accept the			

\$ 100.00 Filing Fee for Application

Designation of Registered Agent

Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

\$ 25.00

\$ 30.00



Commonwealth

## The Commonwealth of Massachusetts Secretary of the Commonwealth State Rouse, Boston, Massachusetts 02188

April 19, 2005

## TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of a Limited Liability Company was filed in this office by

### PRESTIGE HOME MORTGAGE L.L.C.

in accordance with the provisions of Massachusetts General Laws Chapter 156C on February 16, 2005.

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation or withdrawal; and that, said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are: JOHN M. LUCAS

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: JOHN M. LUCAS

The names of all persons authorized to act with respect to real property listed in the most recent filing are: JOHN M. LUCAS



In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.

Secretary of the Commonwealth