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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations

SUBJECT: WEST BAY MONTGAGE CO, LLC. (Name of Limited Liability Company)				
(Name of Limited Liability Company)				
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida				
Please return all correspondence concerning this matter to the following:				
Please return all correspondence concerning this matter to the following: DANIEL J. KoleNDA (Name of Person)				
INIGGT RAY MARTGAGE P.D. L.C. 57 5				
WEST BAY MORTGAGE CO. LCC 5				
300 CENTERVILLE RD SUMMIT WEST SUITE 105 (Address)				
(Address)				
WARWICK R I 02886 (City/State and Zip Code)				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
DANIE / KOIENDA at (401) 921-2525 (Name of Person) (Area Code & Daytime Telephone Number)				
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is a check for the following amount:				
\$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate Certificate 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 BUSINESS IN THE STATE OF FLORIDA: BAY MORTGAGE CO, LLC,
(Name of Foreign Limited Liability Company) (Jurisdiction under the law of which foreign limited liability)

3. 20-0093520 (FEI number, if applicable) JUNE 13TH 2003
(Date of Organization) (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 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: 300 CENTERVIlle RD Summit WEST Suite 105 WARWICK R. I raffle 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: Montgage Broken 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.)

DANIEL J KOLENDA

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:	
WEST BAY MONTGAGE CO, LLC	
2. The name and the Florida street address of the registered agent and office are to the following street address of the registered agent and office are to the following street address of the registered agent and office are to the following street address of the registered agent and office are to the following street address of the registered agent and office are to the registered agent	2005 APR 2
(Name) 1200 N. FEDERAL HWY Florida Street Address (P.O. Box NOT ACCEPTABLE)	2 P 2: 40
BOLA RATON FL 33432 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.

ANTHONY M. COMIONIE

\$ 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 RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Matthew A. Brown Secretary of State

The Office of the Secretary of the State of Rhode Island and Providence Plantations, HEREBY CERTIFIES, that

West Bay Mortgage Company LLC

a Rhode Island limited liability company, filed original articles of organization in this office on the 13th day of June, 2003; and

IT IS FURTHER CERTIFIED that said company is now of record and in good standing in this office.

SIGNED AND SEALED thi thirtieth day of March 2005.

Secretary of State

Bh Illuantoulli

