### Florida Department of State

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CORPORATION

Division of Corporations

Fax Number : (850)205-0383

Account Name : COMPLIANCE CONSULTING CORPORATION OF FLORIDA

Account Number: 120010000135 Phone : (561)586-3645 Fax Number : (561)586-6335

#### FOREIGN LIMITED LIABILITY COMPANY

First Atlantic Mortgage Co., LLC

Certificate of Status	0
Certified Copy	0
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## APPLICATION BY FOREIC.. 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:

1. First Atlantic Mortgage Co., LLC

(Name of foreign limited liability company)

2. Connecticut

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

3. .061531099

( FEI number, if applicable)

4. 01-01-1999

(Date of Organization)

5. Perpetual

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

6. When qualified

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

7. 55 Middletown Avenue, Suite 201

North Haven, CT 06473

(Street address of principal office)

- 8. If Limited Liability Company is a manager-managed company, check here [X]
- 9. The name and usual business addresse(s) of the managing member(s) or manager(s) are/is as follows:

Robert DeStefano, Managing Member 27 Jeffrey Road East Haven, CT 06513

- 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 which it is organized.
- 11. Nature of business or purposes to be conducted or promoted in Florida:

  Mortgage Brokerage

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.)

Robert DeStefano, Managing Member

Typed or printed name of signee

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# 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:

#### First Atlantic Mortgage Co., LLC

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

Compliance Consulting Corporation of Florida 1013 Lucerne Avenue, Suite 201 Lake Worth, FL 33460

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) Jan Martin



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

FIRST ATLANTIC MORTGAGE COMPANY, LLC

is in existence.

Secretary of the State

Date Issued: August 9, 2005