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### TRANSMITTAL LETTER

TO: Registration Se Division of Cor				
SUBJECT:	monty Firs (Name of corpor	+ Mortage, L ration - must include suffix)	LC	_
Dear Sir or Madam:				
The enclosed "Applicat "Certificate of Existenc transact business in Floring Transact Description of the Enclosed Transact	e," and check are submitted	for Authorization to Transac to register the above referen	et Business in Florida," aced foreign corporation	to
Please return all corresp	Pobinson			
Communit	a First Morte	e of Person)		
1925 Vaus	in Road, Sur	te 215		
Kennesan	, GA 30144	Address)	ZINS OCT	- 1
For further information	(City/St	ate and Zip code) se call:	TURY OF STA	
Tom Robins (Name of Perso	at (An	rea Code & Daytime Telepho	2 5	
STREET ADD Registration Se Division of Cor 409 E. Gaines S Tallahassee, FL	ction porations it.	MAILING AI Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7	
Enclosed is a check for	the following amount:			
<b>%</b> \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certificate of State Certified Copy	15 &



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 14, 2005

THOMAS ROBINSON COMMUNITY FIRST MORTGAGE 1925 VAUGHN ROAD, SUITE 215 KENNESAW, GA 30144

SUBJECT: COMMUNITY FIRST MORTGAGE, LLC

Ref. Number: W05000042796

We have received your document for COMMUNITY FIRST MORTGAGE, LLC and check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$55.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

You have completed the wrong form. Please complete the attached form for a limited liability company.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Letter Number: 805A00056881

Diane Cushing Document Specialist

Division of Corporations - P.O. ROX 6397 -Tallahassee Florida 39314



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 28, 2005

THOMAS ROBINSON COMMUNITY FIRST MORTGAGE 1925 VAUGHN ROAD, SUITE 215 KENNESAW, GA 30144

SUBJECT: COMMUNITY FIRST MORTGAGE, LLC

Ref. Number: W05000042796

We have received your document for COMMUNITY FIRST MORTGAGE, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Letter Number: 405A00059192

Diane Cushing Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

### 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: tirst Mortage, LLC Name of Foreign Limited Liability Company) (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 02 (Duration: Year limited liability company will cease to exist or "perpetual") Date of Organization) business in Florida pr (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) (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: 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: Martagge Brok 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.) homas

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.

Community First Mortgage, LLC		
2. The name and the Florida street address of the registered agent and office are:		
Carolyn V. Bowling		
	ZEC SEC	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	ATE A	
Fiorida Sileet Audiess (F.O. Box HOT ACCEPTABLE)	12 34 0	F
Jacksonville FL 32220 City/State/Zip	点 2 2 4 2 4 4 5 6 7 7 7 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8	
City/State/2ip	5 5	

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.

1. The name of the Limited Liability Company is: 1.6

> \$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) Certificate of Status (optional) 5.00

### Secretary of State

**Corporations Division** 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CONTROL NUMBER : 0242964 -DATE INC/AUTH/FILED: 08/21/2002 JURISDICTION : GEORGIA PRINT DATE : 08/02/2005

FORM NUMBER : 211

COMMUNITY FIRST MORTGAGE THOMAS ROBINSON 1925 VAUGHN ROAD, SUITE 215 KENNESAW, GA 30144

#### CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certit under the seal of my office that as of the above print date

> COMMUNITY FIRST MORTGAGE, LLC A GEORGIA LIMITED LIABILITY COMPANY

is in compliance with the applicable filing and annual regi of Title 14 of the Official Code of Georgia Annotated.

Said entity was formed in the jurisdiction stated above or was authorized t transact business in Georgia on the above date and has not filed articles of dissolution, certificate of cancellation or any other similar document with the Office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entit as of the print date above. It does not certify whether or not a notice cintent to dissolve an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending wit the Secretary of Statell

This information is electronically transmitted, issued and certified accordance with the Georgia Electronic Records and Signatures Act and Title 1 of the Official Code of Georgia Annotated and is prima-facie evidence that sai entity is in existence or is authorized to transact business in this state.

20050802192317282



Secretary of State