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SECRETARY OF STATE

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COVER LETTER

TO:	Registration Section
	Division of Corporations

SUBJECT: SUNSHINE STATE MORTGAGE LLC

(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:

B. E. Wilkinson	_
(Name of Person)	
Sunshine State Mortgage LLC	
(Firm/Company)	200 TAL
6609 Ridge Road Ste.1	2005 NOV 14 SECRETARY FALLAHASSE
(Address)	m
Port Richey , Florida 34668	PH 2: 0
(City/State and Zip Code)	80 80

For further information concerning this matter, please call:

(Name of Person) at (727) 514-299 (Area Code & Daytime Te		
•	DRESS:	
s	Division of Corporations	
	ng	
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	L 32301	
owing amount		
\$130.00 Filing I	g Fee & \$\Bigsim\$\$160.00 Filing Fee, Certificate	
\$130.00 Filing F Certific	ig Fed	

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:

1. SUNSHINE STATE MORTGAGE LLC	
(Name of Foreign Limited Liability Company)	
2. WYOMING (Jurisdiction under the law of which foreign limited liability) 3. 20-3745857 (FEI number, if applicable)	
company is organized)	
4. DECEMBER 14,2004 5. PERPETUAL	
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
6. N/A	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7. 6609 RIDGE ROAD	
PORT RICHEY, FLORIDA 34668 (Street Address of Principal Office)	
AR A	******
(Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 8. If limited liability company is a manager-managed company, check here 8. If limited liability company is a manager manager or as follows:	*****
s. The name and usual business addresses of the managing members of managers are as follows.	
ED WILKINSON FEST	
6609 RIDGE ROAD STE 1	٣٢
PORT RICHEY, FLORIDA 34668	
0. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of reco	nds in
he jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a	
ranslation of the certificate under cath of the translator must be submitted.)	
1. Nature of business or purposes to be conducted or promoted in Florida: MORTGAGES	
J. E. Shelkins ou	
Signature of market and the indicate of	
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)	

Typed or printed name of signee

B. E. WILKINSON

. 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:

SUNSHINE STATE MORTGAGE LLC

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

CLAUS RODENBOSTEL	ZOOS NOV
(Name)	S = ==
6609 Ridge Road Ste.1	SEE P
Florida Street Address (P.O. Box NOT ACCEPTABLE)	Y 2: 0
PORT RICHEY, FL 34668	— 38 —

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 finither 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.

(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 Wyoming

Office of the Secretary of State



United States of America, State of Wyoming

SS.

I, JOSEPH B. MEYER, Secretary of State of the State of Wyoming, do hereby certify that SUNSHINE STATE MORTGAGE, LLC, a limited liability company organized under the laws of the State of Wyoming, did on 12/14/2004, file its Articles of Organization in the Office of the Secretary of State of Wyoming, and is in good standing at the date of this certificate.

I FURTHER CERTIFY that this certificate is not to be construed as an endorsement, recommendation, or notice of approval of the limited liability company's financial condition or business activities and practices, as this information is not available from the records of this office.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Wyoming. Done at Cheyenne, the Capital, this 28th day of October A.D., 2005.



Secretary of State