Division of Corporations Public Access System

#### **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000142080 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0383

From:

: CORPORATION SERVICE COMPANY Account Name

Account Number : I20000000195 Phone \_\_ : (850)521-1000

: (850)558-1575 Fax Number

A/FOREIGN LIM SKYLINE HOME MO	ORTGAGE LLC
Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

5/24/2006

#06000142080 3

### 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: Skyline Home Mortgage, LLC (Name of Foreign Limited Liability Company) Dolawara (Jurisdiction under the law of which foreign limited liability (FBI number, if applicable) company is organized) May 17, 2006 Perpetual (Duration: Year limited liability company will cease to exist or "perpetual") (Date of Organization) Upon qualification (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) One Home Campus, MAC X2401-049 Des Moines, IA 50328 (Street Address of Principal Office) 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: Wells Fargo Ventures, LLC One Home Campus, MAC X2401-049 Des Moines, IA 50328 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having outlody 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: To provide residential mortgage lending. Signature of a member of 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 panalties of perjury that the facts stated herein are true.) Karolyn Baker, Vice President

Typed or printed name of signee

ID:CSC TALLAHASSEE

H06000142080 3

## 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.

Skyline Home Mortgage, LLC	
2. The name and the Florida street address of the registered agent and office are:	2006 MAY
Corporation Service Company	
(Name)	24 AM II: ASSEE FLI
1201 Hays Street	FC 5.
Florida Street Address (P.O. Box NOT ACCEPTABLE)	ORIGINAL PROPERTY OF THE PROPE
$T_{\rm e} = 2 + 0.4$	The state of the s
Taliahassee FL 32301	
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.

By: Aun strange A-J See (Signature)

I. The name of the Limited Liability Company is:

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

#06000142080 3

# Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SKYLINE HOME MORTGAGE, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-THIRD DAY OF MAY, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SKYLINE HOME HORTGAGE, LLC" WAS FORMED ON THE SEVENTEENTH DAY OF MAY, A SECOND 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

4133111 8300 060492985 Warriet Smith Hindson Harries Smith Windson

AUTHENTICATION: 4767452

DATE: 05-23-06