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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : FLORIDA INCORPORATORS, INC.

Account Number: 075350000473

Phone

: (813)632-7882

Fax Number

: (305)402-3141

FLORIDA/FOREIGN LIMITED LIABILI

Charter Mortgage Financial Services, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
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Corporate Filing Menu

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF I-LORIDA:

	(Name of Foreign	Limited Lia	ibility Company)			
Georgia	• •	3.				
(Jurisdiction under the company is organize	he law of which foreign limited d)	Hability	(FEI	number, if applic	cable)	
8/21/98		5.	Perpetual			
(Date	of Organization)		(Duration: Year li exist or "perpetua		npany will cea	sc to
Upon Qualifica					TAL	90
	(Date first transacted busi (See sections 608.501 & 60				L CR	90
1061 Pleasant	Valley Road				HAS	
Monroe, GA 30			** ** ** ** ** ** ** ** ** ** ** ** **			
ividilide, GA 30		et Address of	Principal Office)			
	,				01 (1S	⇔
If limited liabilit	ty company is a manager-i	managed c	ompany, check h	ere 🗸	RE	8
The name and us	sual business addresses of	the manag	ging members or	managers are a	s follows:	
Julie A. Russell	sual business addresses of , 146 Hwy 138, Box 374, M n, 146 Hwy 138, Box 374	Monroe, GA	A 30655	managers are a	s follows:	
Julie A. Russell Sally A. Deaco Attached is an origin ejurisdiction under the	, 146 Hwy 138, Box 374, N	Monroe, GA Monroe, methan 90 da A photocopy must be submi	A 30655 GA 30655 sys old, duly authenticis not acceptable. If the tred.)	ated by the official e certificate is in a	having custody	ye,a
Julie A. Russell Sally A. Deaco Attached is an origin ejurisdiction under the instation of the certific	n, 146 Hwy 138, Box 374, Mn, 146 Hwy 138, Box 374 all certificate of existence, no more law of which it is organized. (A late under oath of the translator materials.)	Monroe, GA Monroe, methan 90 da A photocopy must be submi	A 30655 GA 30655 sys old, duly authenticis not acceptable. If the tred.)	ated by the official e certificate is in a	having custody foreign langua	ye,a
Julie A. Russell Sally A. Deaco Attached is an origin ejurisdiction under the instation of the certific	n, 146 Hwy 138, Box 374, Mn, 146 Hwy 138, Box 374 al certificate of existence, no more law of which it is organized. (A atteunder oath of the translator mass or purposes to be consultable business activity Signature of a member (In accordance with section 60)	Monroe, GA Monroe, Monroe,	A 30655 GA 30655 ys old, duly authenticals not acceptable. If the steel) promoted in Flori	ated by the official the certificate is in a da: Mortgage	having custody foreign langua Brokerage a	ye,a
Julie A. Russell Sally A. Deaco Attached is an origin ejurisdiction under the instation of the certific	n, 146 Hwy 138, Box 374, Mn, 146 Hwy 138, Box 374 all certificate of existence, no more law of which it is organized. (A atteunder oath of the translator mass or purposes to be consultable business activity	Monroe, GA Monroe, Monroe,	A 30655 GA 30655 ys old, duly authenticals not acceptable. If the steel) promoted in Flori	ated by the official the certificate is in a da: Mortgage	having custody foreign langua Brokerage a	ye,a

Florida Incorporators, Inc. 8875 Hidden River Pkwy Ste. 300 Tampa, FL 33637 (813) 632-7882 H06000250513

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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 Com	ipany is:				
Charter Mor	Charter Mortgage Financial Services, LLC					
2. The name an	d the Florida street address	s of the registered agent and office are:				
	Florida Incorporators, I	Inc.				
•		(Name)				
		News C45 200				
<i>,</i>	8875 Hidden River P	rkwy Ste. 300 ,				
		ddress (P.O. Box NOT ACCEPTABLE)				
· .						

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. Florida Incorporators, Inc.

Bu Mal n

Mark Hankins, President

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

H06000250513

Control No. K831123

STATE OF GEORGIA

Secretary of State

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

CERTIFICATE OF

EXISTENCE

I, Cathy Cox, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

CHARTER MORTGAGE FINANCIAL SERVICES, L.L.C.

Domestic Limited Liability Company

was formed or was authorized to transact business on 08/21/1998 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated 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 entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 11th day of October, 2006

Cathy Cox Secretary of State

Cordification Number: 334838-1 Reference: Varify this certificate online at http://oorp.acs.aute.gu.us/oorp/scalch/verify.asp