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To:

Division of Corporations

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From:

Account Name

| BLUMBERG/EXCELSIOR CORPORATE SERVICES,

Account Number : 075350000353

(212)431-5000

Phone

Fax Number

: (212)431-1441

FLORIDA/FOREIGN LIMITED LIABILITY CO.

G M I HOME LOANS LLC

Certificate of Status	0
Certified Copy	0
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION RELEASE, FLORIDA STATUL LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE			٠,
I. G M I HOME LOANS LLC	·	_	
(Name of Poreign Lumited	Liability Company)	-	
2. NEW JERSEY	3, 35-2290045	<u>.</u> :	
(Amisdiction under the law of which foreign limited liability company is organized)	(Fill number, if applicable)	1	
4, 2/5/2007	5 PERPETUAL		- <i>.</i>
(Date of Organization)	(Duration: Year limited liability company will cease to exist or 'perpensis')		The Angles of Mark
6. UPON FILING OF THIS DOCUMENT			ting the state of
(Date Brat transacted Sustiness in Fi (See sections 608.501 & 608.502 F.S	orida, if prior to registration.) I. to determine penalty liability)		
7. 256 ROUTE 29, STE 1A			
MORGANVILLE, NJ 07751	of Principal Office)	Jen in	
	naging members or managers are as follows: R, 258 ROUTE 29, STE 1A, MORGANVILLE, N ROUTE 29, STE 1A, MORGANVILLE, NJ 07751	2007 SEC	
GLEN LEMESHEV, MANAGING MEMBER, 258 R		<u> </u>	Plat. 4-cyc.
10 Attached is an original cartificate of existence, no more than 90 of the jurisdiction under the law of which it is organized. (A photocopy translation of the cartificate under oath of the translator must be substituted.) 11. Nature of business or purposes to be conducted on	y is not acceptable. If the confidence is in a floreign language of without)	Gets A.H. 8:	Control days
Signature of a member of an autorior for an autorior sold 408(3), F. an affirmation under the parieties of pa	hev		

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BlumbergExcelsion 62 White Street New York, NY 10013

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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:

G M I HOME LOANS LLC

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

BLUMBERGEXCELSIOR CORPORATE SERVICES, INC.

4435 OLD WINTER GARDEN ROAD

Florida Street Address (P.O. Box NOT ACCEPTABLE)

ORLANDO	FL 32811	
	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.

JOSE MOJICA, ASST. BECY.

(Signature

\$ 100.00 Filing Fee for Application

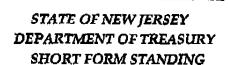
\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

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G M I HOME LOANS LLC 0600291321

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on February 5, 2007.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Glen Lemeshev 256 Rte 79 Ste 1 A Morganville, NJ 07751

Continued on next page . . .

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

