

Florida Department of State

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.

(((H07000162033 3)))



H070001620333ABCA

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 Mumber

: (850)205-0383

From:

Account Name

: C T CORPORATION SYSTEM

Account Number :

FCA0000000023

Phone

(850) 222-1092

Fax Number

(850) 878-5926

MECEIVED 07 JUN 20 PM 1: 1

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Prime Residential Funding LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

15%

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

6/20/2007

CT CORPORATION SYSTM

9269818998

06/20/2007 10:dl

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.	Prime Residential Funding LLC (Name of Foreign Limited Liability Company)		
	· · · · · · · · · · · · · · · · · · ·		
	Delaware 3. 26-0283362 [Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)		,
Č	Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)		
4.	June 4, 2007 5 perpetual		
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")		
б.	•		
	(Date first transacted business in Florids, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)		
7	870 Quarry, Rochester Hills, MI 48306	$g = \frac{1}{2}$	v-s
7.		JUN 20	
		图元	1
	(Street Address of Principal Office)	温っ	m
Ŕ.	If limited liability company is a manager-managed company, check here	A B	O
,	as minima mananal, assemblers, as a manufact manufact constraint, enters mate (sel		
9.	The name and usual business addresses of the managing members or managers are as follows:	og w	• :
	Dahar Mander 1970 Orong Backery 7331 Act 40446	部部の	: .
	Robert Pilcowitz, 870 Quarry, Rochester Hills, MI 48306		
		:· ·	• • • • • •
• ^	Table 1 and the state of the st	Garage	
	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having tody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the ce		
	in a foreign language, a translation of the certificate under oath of the translator must be submitted.)	titticate	
			ŕ
11.	Nature of business or purposes to be conducted or promoted in Florida: Mortgage Lending		
	•		
	Hobert Pilcomity		
	Signaturatof a member or an authorized representative of a member.		
	(in accordant with section 608,408(3), F.S., the execution of this document constitutes an affirmation and the penalties of periory that the facts stated herein are true.)		
	an antifunction actuar this penalties of pentury that the facts stated herein are true)		
	Typhed has printed many of signal		
	Typed hr printed name of signee		

PLAJ7 - S/09/05 C Y Sycams Online

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.

2. The name and the Florida street address of the registered agent and office are: CT Corporation System	
CT Comparation System	
(Name)	
1200 South Pine Island Road	FSE SSE
Flurida Storet Address (P.O. Box NOT ACCEPTABLE)	智
Plantation, Florida 33324	ASSE THE T
City/State/Zip	in Q

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 firther 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 MMUN GIALL Session M. Eisele (Signature Asst. Secretary

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

PLANT - REALIST C T Spans Chair.

02/50/5007 10:41 8508785926



DAGR 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO SEREBY CERTIFY "PRIME RESIDENTIAL FUNDING 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 NINETEENTH DAY OF JUNE, A.D. 2007.

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

43634**8**4 8300 070724231



Warriet Smith Hindan

Harriet Smith Windsor, Secretary of State

DATE: 06-19-07

92628762007 10:41 8508785926