M07000007242

| (Re | equestor's Name) | |
|-------------------------|--------------------|-------------|
| . (Ac | ddress) | |
| (Ac | ddress) | |
| (Ci | ity/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | usiness Entity Nar | me) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only







DK 12/14

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662, TALLAHASSEE, FL 32302 155 OFFICE PLAZA DRIVE, SUITE A, TALLAHASSEE, FL 32301 PHONE: (850) 216-0457 / FAX: (850) 216-0460

DATE: 12/12/2007

NAME: RESIDENTIAL MORTGAGE ACCEPTANCE LLC

TYPE OF FILING: APPLICATION TO TRANSACT BUSINESS

COST: \$125

RETURN:

ACCOUNT: FCA000000015

AUTHORIZATION: PAUL ABBIE HODGE



December 12, 2007

FLORIDA FILING & SEARCH

TALLAHASSEE, FL

SUBJECT: RESIDENTIAL MORTGAGE ACCEPTANCE LLC

Ref. Number: W07000060232

have received your document for RESIDENTIAL MORTGAGE ACCEPTANCE LLC and the authorization to debit your account in the amount of \$125.00. However, the document has not been filed and is being returned for the following:

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a foreign limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations. Therefore, the limited liability company must select an alternate name for use in the state of Florida. Also, please note that adding "of Florida" or "Florida" to the end of the name is not acceptable.

Please insert the alternate name in the space provided on the application form. You must also attach a copy of the written consent of the managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

The alternate name must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited"may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable limited liability company suffixes in Florida: "Limited Company," "L.C.," and "LC."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Regulatory Specialist II

Letter Number: 507A00069742

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. Residential Mortgage Accept | ance LLC | e "Limited Liability Company," "L.L.C.," or "L.L.C.") |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | my; must include | c "Limited Liability Company," "L.L.C.," or "L.L.C.") |
| RMA Lending LLC | | |
| (If name unavailable, enter alternate name adopted consent of the managers or managing members additionally," "L.L.C.," "LLC.") | I for the purpose opting the altern | of transacting business in Florida and attach a copy of the writte ate name. The alternate name must include "Limited Liability" |
| _{2.} California | 3. | The state of the s |
| (Jurisdiction under the law of which foreign lim company is organized) | ited liability | (PEI number, if applicable) |
| _{4.} 11/19/2007 | 5. | perpetual |
| (Date of Organization) | | (Duration: Year limited liability company will cease to exist or "perpetual") |
| 6. | | |
| (Date first transacted (See sections 608.501 & | business in Flori & 608.502 F.S. to | da, if prior to registration.) o determine penalty liability) |
| 7. 18012 Cowan Street #100, I | rvine, CA | 92614 |
| | | |
| (S | trect Address of | Principal Office) |
| 8. If limited liability company is a manage | er-managed c | ompany, check here 🗸 |
| 9. The name and usual business addresses | of the manag | ging members or managers are as follows: |
| Steven E. Olson, 18012 Cov | van Street | #100, Irvine, CA 92614 |
| | | |
| | | |
| 10. Attached is an original certificate of existence, no the jurisdiction under the law of which it is organized translation of the certificate under eath of the translato | I. (A photocopy i | ys old, duly authenticated by the official having custody of records it is not acceptable. If the certificate is in a foreign language, a tted.) |
| 11. Nature of business or purposes to be o | conducted or p | promoted in Florida: mortgage broker |
| 14/4 | Damin | • |
| (In accordance with section | m 608.408(3), F.S cenalties of perjur | norized representative of a member, the execution of this document constitutes y that the facts stated herein are true.) |

Typed or printed name of signee

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 | of the Limited Liability Company is: | | |
|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|--|--|
| Residential | Mortgage Acceptance LLC | | |
| If name unavai | ilable, the alternate name to be used in the state of Florida is: | | |
| RMA | A Lending LLC | | |
| 2. The name as | and the Florida street address of the registered agent and office are: Registered Agent Solutions, Inc. | | |
| | (Name) | | |
| 155 Office Plaza Drive, Suite A Florida Street Address (P.O. Box NOT ACCEPTABLE) | | | |
| | Tallahassee FL 32301 | | |
| | weng, wronew range | | |

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.

(Spenature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or Managing Members of Residential Mortgage Acceptance LLC (Name of Limited Liability Company) a limited liability company duly organized and existing under the laws of California (State or Country of Organization) Because the name of this foreign limited liability company does not satisfy the requirements of the s. 608.406, F.S., the limited liability company hereby adopts the following name to transact business in the state of Florida: RMA Lending LLC (Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.) Date: 12/12/2007 Signature(s) of Manager(s) and/or Managing Member(s):

State of California

Secretary of State

CERTIFICATE OF GOOD STANDING CALIFORNIA LIMITED LIABILITY COMPANY

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

That on the 19th day of November, 2007, RESIDENTIAL MORTGAGE ACCEPTANCE LLC, became recognized under the laws of the State of California by filing its Articles of Organization in this office; and

That according to the records of this office, the said limited liability company is authorized to exercise all its powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition of this limited liability company.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of December 11, 2007.



Jena Bowen

DEBRA BOWEN Socretary of State

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NP-25 (REV 1/2007)

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