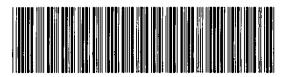
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EXAMINER



CORPDIRECT AGEN 515 EAST PARK AVI TALLAHASSEE, FL 222-1173	ENUE.	nerly CCRS)	
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CONTACT:	ASHLEY SM	<u>IITH</u>	BUNDO PAR SE STORIO
DATE:	06-22-2009		7,
<b>REF.</b> #:	001207.10615	<u>56</u>	TO TO THE STATE OF
CORP. NAME:	ZENTA MO	RTGAGE SERVICES, LLC	<b>7</b>
( ) ARTICLES OF INCO	RPORATION	( ) ARTICLES OF AMENDMENT	( ) ARTICLES OF DISSOLUTION
( ) ANNUAL REPORT		( ) TRADEMARK/SERVICE MARK	( ) FICTITIOUS NAME
(XX) FOREIGN QUALIFI	ICATION	( ) LIMITED PARTNERSHIP	( ) LIMITED LIABILITY
( ) REINSTATEMENT		( ) MERGER	( ) WITHDRAWAL
( ) CERTIFICATE OF C	ANCELLATION		
( ) OTHER:			
STATE FEES PR	REPAID WI	тн снеск# <u>530 704</u>	_ FOR \$ <u>125.00</u>
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PLEASE RETUR	RN:		
( ) CERTIFIED COPY	( ) <b>C</b> I	ERTIFICATE OF GOOD STANDING	(XX) PLAIN STAMPED COPY
( ) CERTIFICATE OF	FSTATUS		

Examiner's Initials

#### 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 TOTRANSACT RUSINESS IN THE STATE OF FLORIDA.

Zenta Mortgage Services, LLC	
(Name of Foreign Limited Liability Comp.	pany; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopte consent of the managers or managing members ad Company," "L.L.C.," "LLC.")	ed for the purpose of transacting business in Florida and attach a copy of the written dopting the alternate name. The alternate name must include "Limited Liability
2. Delaware	<sub>3</sub> 27-0319865
(Jurisdiction under the law of which foreign lin company is organized)	mited liability (FEI number, if applicable)
4. 6/5/2009	5. Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon filing	
(Date first transacted (See sections 608.501	business in Florida, if prior to registration.) & 608.502 F.S. to determine penalty liability)
7	8215 Forest Point Blvd.
	Charlotte, NC 28273
(5	Street Address of Principal Office)
8. If limited liability company is a manag	<u> </u>
9. The name and usual business addresses	es of the managing members or managers are as follows:
Henry G. Hortenstine, Manager	28273 Forest Point Blvd., Charlotte, NC 28273
	o more than 90 days old, duly authenticated by the official having custody of records in d. (A photocopy is not acceptable. If the certificate is in a foreign language, a tor must be submitted.)
11. Nature of business or purposes to be o	conducted or promoted in Florida:
Mortgage lending and brokering	
144-	
Signature of a mem	nber or an authorized representative of a member.
(In accordance with section	on 608.408(3), F.S., the execution of this document constitutes penalties of perjury that the facts stated herein are true.)
•	nry G. Hortenstine, Manager

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.

	f the Limited Liability Co e Services, LLC	pu	
If name unavail	able, the alternate name t	to be used in the state of Florida is:	
2. The name ar	nd the Florida street addre	ess of the registered agent and office are:	<u></u>
		Incorp Services, Inc.	
		(Name)	
	1	7888 67th Court North	
	Florida Street	Address (P.O. Box NOT ACCEPTABLE)	
•	Loxahatchee	FL 33470	
		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.

Erio Wolz, Assistant Secretary

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

## Delaware

PAGE I

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ZENTA MORTGAGE SERVICES, 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. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ZENTA"

MORTGAGE SERVICES, LLC" WAS FORMED ON THE FIFTH DAY OF JUNE,

A.D. 2009.

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

4695578 8300

090632136

AUTHENTY CATION: 7371924

DATE: 06-19-09

You may verify this certificate online at corp.delawars.gov/authver.shtml