# M11000003332

(Requestor's Name)
(Address)
(Address)
(riddicss)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Linky Warne)
(Document Number)
Certified Copies Certificates of Status
Special instructions to Filing Officer:

Office Use Only

B. KOHR
JUN 8 0 2011
EXAMINER



500209366835

11 JUN 30 PM 1:3

SECRETARY OF STATE DIVISION OF CORPORATION

RECEIVED

1 JUN 30 AN IO: 54

DEFANCE SUSPENSION OF SUSPEN



ACCOUNT NO. : 12000000195

REFERENCE : 831243

4392103

AUTHORIZATION

COST LIMIT

ORDER DATE: June 29, 2011

ORDER TIME : 8:04 AM

ORDER NO. : 831243-020

CUSTOMER NO: 4392103

#### FOREIGN FILINGS

NAME: INDYMAC VENTURE, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Matthew Young -- EXT# 2962

EXAMINER:

#### **COVER LETTER**

COVER LETTER  TO: Registration Section Division of Corporations  SUBJECT: INDYMAC VENTURE, LLC  Name of Limited Liability Company
TO: Registration Section  Division of Corporations
The second se
SUBJECT: INDYMAC VENTURE, LLC
Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the following:
SUSAN VIVÍNO
Name of Person
ONEWEST BANK, FSB
Firm/Company
888 EAST WALNUT STREET
Address
PASADENA, CALIFORNIA 91101
City/State and Zip Code
SUSAN.VIVINO@OWB.COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Suspin Vivino at (624) 535-1642  Name of Person Area Code & Daytime Telephone Number
Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations Registration Section P.O. Box 6327 Clifton Building Tallahassee, FL 32314 Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:  \$\Bigsim \mathbb{\text{\$125.00 Filing Fee}} \Bigsim \mathbb{\text{\$\$\$}\$}\mathbb{\text{\$\$\$}\$}\mathbb{\text{\$\$}\$} \mathbb{\text{\$\$}\$} \mathbb{\text{\$\$}\$}\mathbb{\text{\$\$}\$} \mathbb{\text{\$\$}\$} \mathbb{\text{\$}\$} \mathbb{\text{\$\$}\$} \mathbb{\text{\$\$}} \mathbb{\text{\$\$}\$} \mathbb{\text{\$\$}\$} \mathbb{\text{\$\$}} \mathbb{\text{\$\$}\$} \mathbb{\text{\$\$}\$} \mathbb{\text{\$\$}\$} \mathbb{\text{\$\$}} \mathbb{\text{\$\$}\$} \mathbb{\text{\$\$}} \mathbb{\text{\$\$}\$} \mathbb{\text{\$\$}} \mathbb{\text{\$\$}} \mathbb{\text{\$\$}\$} \mathbb{\text{\$\$}} \te

## 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 FLORIDA:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE S.	TATE OF FLORIDA:
1. INDYMAC VENTURE, LLC	
(Name of Foreign Limited Liability Company; must include	e "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the altern Company," "L.L.C," "LLC.")	ate name. The alternate name must include "Limited Liability.
2. DELAWARE 3.	26-4401567
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
	PERPETUAL
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. Will-commence business upon filing.	Z CZK
(Date first transacted business in Flori (See sections 608.501 & 608.502 F.S. to	26-4401567  (FEI number, if applicable)  PERPETUAL  (Duration: Year limited liability company will cease to exist or "perpetual")  Ida, if prior to registration.) o determine penalty liability)
7. 888 EAST WALNUT STREET	
PASADENA, CA 91101	Se de la companya de
(Street Address of	Principal Office)
8. If limited liability company is a manager-managed c	ompany, check here
9. The name and usual business addresses of the manag	ging members or managers are as follows:
ONEWEST BANK, FSB - SOLE MEMBER	
888 EAST WALNUT STREET	
PASADENA, CA 91101	
10. Attached is an original certificate of existence, no more than 90 dathe jurisdiction under the law of which it is organized. (A photocopy it translation of the certificate under oath of the translator must be submit	ys old, duly authenticated by the official having custody of records in is not acceptable. If the certificate is in a foreign language, a
11. Nature of business or purposes to be conducted or p	promoted in Florida:
FINANCIAL SERVICES	
Susin 9	norized representative of a member.
Signature of a member or an auth	orized representative of a member.
(In accordance with section 608,408(3), F.S., the execut	ion of this document constitutes an affirmation under the
penalties of perjury that the facts stated herein are true,	I am aware that any false information submitted in a a third degree felony as provided for in s.817.155, F.S.)
Susan Vivino, Asst. Sec., OneWe	

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 the Limited Liability	Company is:	
INDYMAC V	VENTURE, LL&		, <u></u>
If unavailable	, the alternate to be use	d in the state of Florida is:	
2. The name a	and the Florida street a	ddress of the registered agent and office are:	,
	Corporation Service	Company	
		(Name)	
	1201 Hays Street	Address (D.C. Derr NOTE company)	
	rionaa su	reet Address (P.O. Box NOT ACCEPTABLE)	
	Tallahassee	FL 32301	
		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.

Corporation Service Company

By:

(Signature)

Matthew Young

Asst. V. Pres.

\$ 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 1

### The First State

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

DELAWARE, DO HEREBY CERTIFY "INDYMAC VENTURE, 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 TWENTY-NINTH DAY OF JUNE, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "INDYMAC VENTURE, LLC" WAS FORMED ON THE SIXTH DAY OF MARCH, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

4655516 8300

110777930

AUTHENTYCATION: 8873025

DATE: 06-29-11

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