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### Foreign Limited Liability Company MetLife Home Loans LLC

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$125.00

EXAMINER NOV 1.5 2011

# COVER LETTER

	ration Section on of Corporations	; !	
	•		
SUBJECT: M	letLife Home Loans LLC		
		Name of Limited Liability Company	
The enclosed "A Existence, and	Application by Foreign Limited the check are submitted to register	d Liability Company for Authorization to Transact Business in Florida," Certific the above referenced foreign limited liability company to transact business in F	ate of lorida
Please return al	l correspondence concerning the	his matter to the following:	
	Dale S	Mame of Person	
		Name of Person	
		ndrews Law, PLLC Firm/Company	
		Firm/Company	
	2028	Address  Address  City/State and Zip Code	
		Address	
	Lewisu	ille TX 75067	
		City/State and Zip Code	
		tbrady@metlifc.com	
	E-mail addr	ess: (to be used for future annual report notification)	
For further info	rmation concerning this matter	, please call;	
	Sara Frederick	at (2/4) 932-3685  Area Code & Daytime Telephone Number	
	Name of Person	Area Code & Daytime Telephone Number	
	ING ADDRESS:	STREET ADDRESS:	
	on of Corporations	Division of Corporations	
	ration Section	Registration Section	
	ox 6327 assec, FL 32314	Clifton Building 2661 Executive Center Circle	
1 ដូមផ្នារ	assec, pl 32314	Tallahassee, FL 32301	
	check for the following a 0 Filing Fee \$130.00 Fil Certificate	ing Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certificate	

# 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 TOTRANSACT BY NINESS IN THE STATE OF BY OPIOA.

~	WILD CLADICAL T CONFAINT TO TRAINGACT BUSINESS IN THE STATE OF FLORIDA:
l,	MetLife Home Loans LLC
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(It	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written
ÇO	nsent of the managers or managing members adopting the alternate name. The alternate name prost include "Limited Liability
Co	ompany," "L.L.C," "LLC.")
_	The farmer of the control of the con
۷٠,	Oclaware  3. 27-0858844 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
	company is organized)
4,	(Date of Organization)  5. Perpetual (Duration; Year limited liability company will cease to
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
	• • •
6.	Upon Qualification
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
	·
7.	4000 Horizon Way, Irving, TX 75063
	Commendation of Pales and Office
	(Street Address of Principal Office)
8.	If limited liability company is a manager-managed company, check here
٠.	Thinked hability company is a manager-managed company, check here
9.	The name and usual business addresses of the managing members or managers are as follows: 9
• •	
	SEE ATTACHMENT
	·
	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in
	jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a
irai	station of the certificate under oath of the translator must be submitted.)
11	. Nature of business or purposes to be conducted or promoted in Florida:
• •	. Training of Passings of Passings to be extraorded of Promotion at Literature.
	Mortgage Banking Business and related activities
	$Om_{\alpha} :                                   $
	Marion Mc Dougall
	Signature of a member or an authorized representative of a member.
	(In accordance with section 608,408(3), P.S., the execution 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 document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)
	- · · · · · · · · · · · · · · · · · · ·
	Marion McDougall, Manager  Typed or printed name of signee
	I Voca or printed name of stance

# 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 L	imited Liability Compa	any is:	
MetLife Home Loans LI	.c		
If unavailable, the alt	emate to be used in the	state of Florida is:	
2. The name and the	Florida street address o	of the registered agent and office are:	
стс	orporation System		<u></u>
		(Name)	
1200 \$	South Pine Island Road		
	Florida Street Addr	ess (P.O. Box <u>NOT</u> ACCEPTABLE)	
Plant	ation	FL 33324	
		City/State/Zip	
liability company at the agent and agree to accretating to the proper	ne place designated in th t in this capacity. I furth and complete performar	Barth	niment as registered of all statutes and accept the
	\$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Filing Fee for Application Designation of Registered Agent Certified Copy (optional) Certificate of Status (optional)	

#### **ATTACHMENT**

## MANAGERS LIST

# METLIFE HOME LOANS LLC

Donalee DeMaio 334 Madison Avenue Convent Station, New Jersey 07961

Duane L. Elmer 4000 Horizon Way Irving, Texas 75063

Brian Hale 4000 Horizon Way Irving, Texas 75063

James Rose 4000 Horizon Way Irving, Texas 75063

Marion McDougall 4000 Horizon Way Irving, Texas 75063

# Delaware

PAGE

# The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "METLIFE ROME LOANS 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 TENTH DAY OF NOVEMBER, A.D. 2011.

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

2348515 8300

111184475

You may verify this certificate online

Jeffrey W. Gullock. Secretary of State

DATE: 11-10-11