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To:

Division of Corporations

Fax Number : (850)617-6383

Prom:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)222-1092 Phone

: (850)878-5368 Fax Number

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Email Address:

## Foreign Limited Liability Company Primelending Ventures Management, LLC

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

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#### **COVER LETTER**

| TO: Registration Section Division of Corporations  |   |  |
|--|---|--|
| SUBJECT: PrimeLending Ventures Management,   | LLC ne of Limited Liability Company   |  |
| The enclosed "Application by Foreign Limited Liab<br>Existence, and check are submitted to register the al | bility Company for Authorization to Transact Business in Floric<br>bove referenced foreign limited liability company to transact bu | da," Certificate of usiness in Florida |
| Please return all correspondence concerning this ma  | atter to the following:   | •                                      |
| Bishop Henley  | Naine of Person   |  |
| Direct and Carthagain Management   |   |  |
| PrimeLending Ventures Managem  | Pirm/Company  | _                                      |
| 18111 Preston Rd. #900-A   |   | _                                      |
|  | Address   |  |
| Dallas TX 75252  | City/State and Zip Code   |  |
| bhenley@primelending.com   |   | 2012 A<br>SECR                         |
| E-mail address: (  | to be used for future annual report notification)   | APR 25<br>APR 25<br>AHASSI             |
| For further information concerning this matter, plea   | ase call:   | <u>m</u> -c                            |
| Bishop Henley  | at ( 469 )  |  |
| Name of Person   | Area Code & Daytime Telephone Number  | SET ST                                 |
| MAILING ADDRESS: Division of Corporations Registration Section   | STREET ADDRESS: Division of Corporations Registration Section   | <b>→</b>                               |
| P.O. Box 6327<br>Tallahassee, FL 32314   | Clifton Building 2651 Executive Center Circle Tallahassee, FL 32301   |  |
| Enclosed is a check for the following amou \$125.00 Filing Fee \$130.00 Filing Fe Certificate of Sta       | ee &   \$155.00 Filing Fee &   \$160.00 Filing Fee, Certi   | ficate<br>py                           |

FL057 - 10/03/2010 C T System Online

## 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:

| PrimeLending Ventures Management, LLC  |   |
|--|---|
| (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.   | z.")  |
| f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a consistent of the managers or managing members adopting the alternate name. The alternate name must include "Limit ompany," "L.L.C," "LLC.")  | py of the writte<br>ted Liability                 |
| Texas  (Jurisdiction under the law of which foreign limited liability company is organized)  (FEI number, if applicable)   | , <del>, , , , , , , , , , , , , , , , , , </del> |
| 08/20/2008  5 Perpetual  (Date of Organization)  (Duration: Year limited liability company will exist or "perpetual")  | cease to  |
| Not Applicable   |   |
| (Date first transacted business in Fiorida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)  |   |
| 18111 Preston Rd. #900-A   |   |
| Dallas TX 75252  | JANII<br>OBSC<br>ZBZ                              |
| (Street Address of Principal Office)   | CRETA<br>CAHA                                     |
| If limited liability company is a manager-managed company, check here  | TAS   |
| The name and usual business addresses of the managing members or managers are as follows   | : 1.10 %<br>2.10 %                                |
| See attached   | E S   |
|  | 등점 두  |
|  | -3  |
| Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having cust e jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language installation of the certificate under eath of the translator must be submitted.)         | guage, a  |
| 1. Nature of business or purposes to be conducted or promoted in Florida: PrimeLending Ventures  | <del></del>                                       |
| Management, LLC is the parent company of PrimeLending Ventures, LLC, a mortgage company.   | ······································            |
| Susie Barya  |   |
| Signature of a member or an authorized representative of a member.   | ı   |
| (In accordance with section 608.408(3), F.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 faise information submitted document to the Department of State constitutes a third degree felony as provided for in s.817.155, Suzie Garza, Manager | in a  |
| Typed or printed name of signee  |   |

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Hannger List
Research McGIII 18111 Preston Rd. #900 Dalies, TX 75252

PrimeLending Ventures Management, LLC

 Yodd Salmane
 18111 Preston Rd. #900 Dellas, TX 76262

 W. Keith Kidin
 18111 Preston Rd. #900 Dellas, TX 76262

 Susennah Garza
 18111 Preston Rd. #900 Dellas, TX 76262

SECRETARY OF STAT

PR 25 AH •

PAGE 04/06

CT CORPORATION

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# 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 Co  | mpany is:  |
|--|--|--|
| PrimeLending                                     | Ventures Management, LLC   |  |
| If unavailable                                   | e, the alternate to be used in   | the state of Florida is:                                       |
| 2. The name                                      | and the Florida street addre   | ess of the registered agent and office are:                    |
|  | C T Corporation System   |  |
|  |  | (Name)   |
|  | 1200 South Pine Island Road  | ·  |
|  | Florida Street   | Address (P.O. Box NOT ACCEPTABLE)                              |
|  | Plantation   | FL 33324   |
| iability comp<br>igent and agr<br>elating to the | eary at the place designated in this capacity. If a proper and complete perform my position as registered as CT Conporation Sy  By:   M. A. C. | city/State/Zip  AHT AS AND |
|  | \$ 100.  | 00 Filing Fee for Application                                  |
|  | \$ 25.0  | 00 Designation of Registered Agent                             |
|  | \$ 30.   | 00 Certified Copy (optional)                                   |

Certificate of Status (optional)

PLUS? - 10/05/2010 C Y System Online

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Hope Andrade Secretary of State

### Office of the Secretary of State

#### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for PrimeLending Ventures Management, LLC (file number 801019384), a Domestic Limited Liability Company (LLC), was filed in this office on August 20, 2008.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Scal of State at my office in Austin, Texas on April 24, 2012.

SWX3

Hope Andrade Secretary of State

Phone: (512) 463-5555 Prepared by: SOS-WEB Come visit us on the internet at http://www.sox.state.tx.us/ .

Pax: (512) 463-5709

Pax: (512) 463-3709 TID: 10264

Dial: 7-1-1 for Relay Services Document: 418561150003