(Re	equestor's Name)	·
(Ad	ldress)	<u> </u>
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nar	me) '
(Do	ocument Number)	·
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
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Office Use Only

JAN 24 2013

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IUN SERVICE GUMPANT						
ACCOUNT NO. : 12000000195						
REFERENCE : 503958 5021613						
AUTHORIZATION :						
AUTHORIZATION: Spelle man  COST LIMIT: \$ 125.00						
ORDER DATE : January 22, 2013						
ORDER TIME : 5:18 PM						
ORDER NO. : 503958-005						
CUSTOMER NO: 5021613						
FOREIGN FILINGS						
NAME: GOSHEN MORTGAGE REO LLC						
XXXX QUALIFICATION (TYPE: <u>LL</u> )						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING						
CONTACT PERSON: Susie Knight EXT# 52956						

EXAMINER:

## 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:

	nust include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter afternate name adopted for the consent of the managers or managing members adopting Company," "L.L.C," "LLC.")	he purpose of transacting business in Florida and attach a copy of the wr g the alternate name. The alternate name must include "Limited Liability
Delaware     (Jurisdiction under the law of which foreign limited I company is organized)	3. 27-1932207 (FEI number, if applicable)
4. February 16, 2010 (Date of Organization)	5. Perpetual  (Duration: Year limited liability company will cease to exist or "perpetual")
6. (Date first transacted busin (See sections 608.501 & 608	ess in Florida, if prior to registration.) .502 F.S. to determine penalty liability)
7. 411 West Putnam Avenue	
Greenwich	CT 06830 Office)
<ol> <li>If limited liability company is a manager-m</li> <li>The name and usual business addresses of t</li> <li>Wexford Capital LP</li> </ol>	anaged company, check here A to the managing members or managers are as follows:
411 West Post-ser Assesse	
Greenwich CT 06830	
the jurisdiction under the law of which it is organized. (A partial translation of the certificate under oath of the translator must	than 90 days old, duly authenticated by the official having custody of record chotocopy is not acceptable. If the certificate is in a foreign language, a st be submitted.)  ucted or promoted in Florida:
	6 C. Sit-n
	or an authorized representative of a member.
(In accordance with section 608.408(3), F.S.	, the execution of this document constitutes an affirmation under the ein are true. I am aware that any false information submitted in a

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	f the Limited Liability	Company is:	
Goshen Mortg	age REO LLC		
If unavailable,	the alternate to be use	ed in the state of Florida is:	
2. The name ar	nd the Florida street ac	ddress of the registered agent and office are:	
	Corporation Service	Company	
		(Name)	<del></del>
	-1201-Hays-Street		
	Florida Sti	reet Address (P.O. Box <u>NOT</u> ACCEPTABLE)	<del></del>
	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

Sue G. Knight

(Signature)

Assistant Vice President

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

#### COVER LETTER

	tration Section ion of Corporations	
SUBJECT:	Goshen Mortgage REO LLC	·
	Na	me of Limited Liability Company
		bility Company for Authorization to Transact Business in Florida," Certificate of above referenced foreign limited liability company to transact business in Florida
Please return a	ll correspondence concerning this m	atter to the following:
	Jacquelyn Werner	
		Name of Person
	Wexford Capital LP	
		Firm/Company
	411 West Putnam Avenue	· · · · · · · · · · · · · · · · · · ·
		Address
	Greenwich CT 06830	
		City/State and Zip Code
	jwerner@wexford.com	
	E-mail address: (	to be used for future annual report notification)
or further info	ormation concerning this matter, plea	ase call:
Kimb	crly McLoughlin	at (203 ) 862-7056
	Name of Person	Area Code & Daytime Telephone Number
Divisio Regist P.O. B	ING ADDRESS: on of Corporations ration Section sox 6327 assee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
	check for the following amou 00 Filing Fee \$\bigsim \frac{1}{30.00}\$ Filing Fe Certificate of Sta	ee & [\$155.00 Filing Fee & [\$160.00 Filing Fee, Certificate

# Delaware

PAGE 1

### The First State

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

DELAWARE, DO HEREBY CERTIFY "GOSHEN MORTGAGE REO 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-SECOND DAY OF JANUARY, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GOSHEN MORTGAGE REO LLC" WAS FORMED ON THE SIXTEENTH DAY OF FEBRUARY, A.D. 2010.

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

4789200 8300

130076329

Jeffrey W Bullock, Secretary of Stat AUTHENTY CATION: 0159683

DATE: 01-22-13

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