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COVER LETTER

Registration Section Division of Corporations

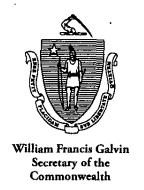
∴ TO:

SUBJECT: Prestige Home Mortgage 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:
John Lucas
Name of Person
Prestige Home Mortgage LLC
Firm/Company
45 Lyman St
Address
Westborough MA 01581
City/State and Zip Code
jlucas@prestigehomemortgage.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Simon Summers-Hodge at (508) 948-0733
Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclosed is a check for the following amount: Image: Control of Status Image: Control of Status

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Prestige Home Mortgage (Name of Fore	e LLC. ign Limited Liability Company; must i	nclude "Limited Liabi	lity Company," "L.L.C.," or "L	LC.")
(If name unavailable, enter all Liability Company," "L.L.C,"	ternate name adopted for the purpose o	of transacting business	in Florida. The alternate name t	must include "Limited
2. Massachusetts (Jurisdiction under the law)	of which foreign limited liability	3	(FEI number, if applicable)	
company is organized) 4.	(Data first transacted business	in Florida, if prior to r	agistration)	
5. 45 Lyman Street	(Date first transacted business (See sections 605.0904 & 605.09	005, F.S. to determine	penalty liability)	
				DIVÎ
Westborough MA 015				Sec.
471 01. 4	(Street Address of Prin	ncipal Office)		Z ZA
6. 45 Lyman Street				21
Westborough MA 0158	1			JUN 21 AN D:
	(Mailing Ad	dress)		5 35
7. Name and street address	s of Florida registered agent: (P.O.	. Box <u>NOT</u> acceptal	ole)	- 10 M
Name:	Registered Agents Inc.			
Office Address:	3030 N. Rocky Point Dr. STE	150A		
	Tampa		, Florida <u>33607</u>	
Registered agent's accept	(City)		(Zip code)	
Having been named as reg designated in this applicat to complywith the provision	gistered agent and to accept service tion, I hereby accept the appointments of all statutes relative to the property position as registered agent.	ent as registered ag	ent and agree to act in this o	capacity. I further agree
	(Registere	ed agent's signature)		
8. The name, title or capa	city and address of the person(s) w	ho has/have authorit	y to manage is/are:	
John Lucas Principal/C	Owner 45 Lyman Street, Westb	borough MA 0158	1	
Wesley Oliver, Princi	pal/Owner 45 Lyman Street,	Westborough M	A 01581	
9. Attached is a certificate jurisdiction under the law of the translator must be su		old, duly authentica dificate is in a foreign	ted by the official having cu language, a translation of th	stody of records in the ne certificate under oath
This document is executed submitted in a document to	in accordance with section 605.020 the Department of State constitutes	03 (1) (b), Florida St	atutes. I am aware that any fa ny as provided for in s.817.15	alse information 55, F.S.
	John Lucas			
	Typed or prir	nted name of signee		



The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02133

June 12, 2017

TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of a Limited Liability Company was filed in this office by

PRESTIGE HOME MORTGAGE L.L.C.

in accordance with the provisions of Massachusetts General Laws Chapter 156C on February 16, 2005.

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation or withdrawal; and that said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are: WESLEY S OLIVER, JOHN M LUCAS

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: WESLEY S OLIVER, JOHN M LUCAS, WESLEY STEELE OLIVER

The names of all persons authorized to act with respect to real property listed in the most recent filing are: WESLEY S OLIVER, JOHN M LUCAS



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth
on the date first above written.

Secretary of the Commonwealth

Min Tranin Galein