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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJEC	Florida Advantage		Limited Liability (Company					
		reign Limited Liability Com d to register the above refer							
Please ret	urn all correspondence	concerning this matter to the	following:						
	Suzanne Weav	er							
		N	ame of Person						
	Movement Mo	rtgage, LLC							
	Firm/Company								
	575 Lynnhaver	n Pkwy, Ste 102							
			Address						
	Virginia Beach	. VA 23452							
		City/S	State and Zip Code	-					
	jvteam@movem								
		E-mail address: (to be use	d for future annual	report not	infication)				
For furthe	er information concernin	g this matter, please call:							
	Suzanne Weaver		844 at (283-92	74				
-	Name o	of Contact Person	Area Code	Day	time Telephone Number				
]]	MAILING ADDRESS: Division of Corporation: Registration Section P.O. Box 6327 Fallahassee, FL 32314			Division Registrat Clifton B 2661 Exc	of Corporations ion Section uilding ecutive Center Circle see, FL 32301				
	is a check for the follow ☐ \$125.00 Filing Fee	ring amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	ng Fee &	■ \$160.00 Filing Fee, Co of Status & Certified Cop				

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

IN COMPLANCE 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:

	•	rona ruc y		ibility Company," "L.L.C," or "LLC,")
Delaware	(buch foreign limited liability company is organized)	3.	83-2409588	ber, tf applicable)
•	aca to digit talance taching company is to generally		(1 7% (1941)	ост, г. крупкаот ј
NA	(Date first transacted business in Florida, if prior	(
	(See sections 605.0904 & 605.0905, F.S. to dete	mine penalty	lability)	
575 Lynnhaven Pkwy (Street Address of	, Ste 102	6.	575 Lynnbaven Pkwy, Ste	
Virginia Beach, VA 2.	•		(Mailing Add Virginia Beach, VA 23452	
Name and street addre	ss of Florida registered agent: (P.O. Bo	ox NOT a	accentable)	70.70
	Corporation Service Company		,	FC &
Name:	Corporation Service Company	.		至 2
	1201 Hays Street			2000 N
Office Address:				$\infty > \infty$
Office Address:				8 1355
	Tallahassee (City)		, Florida 32301 (Zip cod	2018 NOV -8 AH 9: SECRETARY US FALLAHASSET FI
egistered agent's accep aving been named us re signated in this applica comply with the provis nd accept the obligation	Tallahassee (City) otance: rgistered agent and to accept service of tion, I hereby accept the appointment ions of all statutes relative to the propos s of my position as registered agent.	as registe	(Zip cod for the above stated limited tred agent and agree to act	l liability company at the plain in this capacity. I furthere
egistered agent's accep aving been named us re signated in this applica comply with the provis ad accept the obligation	Tallahassee (City) stance: egistered agent and to accept service of tion, I hereby accept the appointment ions of all statutes relative to the prop	as registe er and co.	(Zip cod for the above stated limited ered agent and agree to act mplete performance of my	l liability company at the plain in this capacity. I furthere
egistered agent's acception aving been named as resignated in this application comply with the provised accept the obligation. The name, title or cap	Tallahassee (Caty) Stance: registered agent and to accept service of attion, I hereby accept the appointment ions of all statutes relative to the proposes of my position as registered agent. Corporation Service Company By: (Registered agent Olivia Mahach, Author acity and address of the person(s) who	as registeer and con-	(Zip cod for the above stated limited ered agent and agree to act mplete performance of my resentative authority to manage is/are:	l liability company at the plain this capacity. I furthefe in this capacity. I furthefe duties, and I am familiar w
egistered agent's accepaving been named us resignated in this application accept the obligation. The name, title or capacity:	Tallahassee (City) Stance: Tallahassee (City) Tallahassee Tallahassee (City) Tallahassee Tallahassee Tallahassee (City) Tallahassee Tal	as registeer and con-	(Zip cod for the above stated limited ered agent and agree to act mplete performance of my resentative	l liability company at the plain in this capacity. I furthere
egistered agent's acception aving been named as resignated in this application comply with the provised accept the obligation. The name, title or cap	Tallahassee (Caty) Stance: registered agent and to accept service of attion, I hereby accept the appointment ions of all statutes relative to the propose of my position as registered agent. Corporation Service Company By: (Registered agent Olivia Mahach, Author acity and address of the person(s) who Name and Address: William Harris	as registeer and con-	(Zip cod for the above stated limited ered agent and agree to act mplete performance of my resentative authority to manage is/are:	l liability company at the plain this capacity. I furthefe in this capacity. I furthefe duties, and I am familiar w
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Typod or printed name of signee



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

DELAWARE, DO HEREBY CERTIFY "FLORIDA ADVANTAGE MORTGAGE, 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 OCTOBER, A.D. 2018.

Authentication: 203701656

Date: 10-29-18