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#### Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

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From:

Account Name : AMERICAN MORTGAGE LICENSING

Account Number : I20150000056 Phone : (469)688-8441 Fax Number : (972)587-7479

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: lisa@amlicensing.com

#### Foreign Limited Liability Company Next Home Loans LLC

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#### APPLICATION BY FOREIGN LIMITAD LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS AGIROLT NI

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

IN COMPLIANCE WITH SECTION 6/6 0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREKEN, LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS, IN THE STATE OF FLORIDA.

COMPANT TO TRAINING DE	ANNELS IN THE STATE OF PILAMIA.		
1. Next Home Loans LLC			
(Name of Foreign	Limited Liability Company; must include "Limited Liability Company; must include "Liability Company; must includ	ited Liability Company," "L.L.C.," or "E.C."	)
(If name unavailable, enter alterrate to	issue adopted for the purpose of transacting business in	Florida. The alterrate name must include "Limited Las	bility Company," "L.L.C," or "LLC.")
2. North Carolina		_	,
	hich foreign limited liability (empany is (riginized)	3. <u>83-4239136</u> (FEI num	ber, if applicable)
4			
4. <u></u>	(Date first transacted business in Florida, if prior (See sections 605 0904 & 605 0905, F.S. to dete	to registration )	
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5. 615 S College St (Street Address of	Principal Office)	6. 615 S College St (Mailing Add	ress)
8th Floor	<del></del>	8th Floor	<u> </u>
Charlotte, NC 28202		Charlotte, NC 28202	
7. Name and street addre	ss of Florida registered agent: (P.O. B	ox <u>NOT</u> acceptable)	
Name:	Registered Agent Solutions, Inc.		Se C
	155 Office Plaza Dr, Suite A		, φ. C1
Office Address:	133 Crifice Flaza Di, Culte A		
	Tallahassee	, Florida 32301	<del></del>
Registered agent's accep	(Cny)	[Zip co	(4¢)
Having been named as re	egistered agent and to accept service i	of process for the above stated limited	l liability company at the place
designated in this applica	ition, I kereby accept the appointmen	t as registered agent and agree to act	in this capacity. I further ugree
	ions of all statutes relative to the prop	er and complete performance of my	duties, and I am familiar with
and accept the obligation	is of my position as registered again.		
	0111		<del></del>
	(Registered ager	u s wgmanst)	
	acity and address of the person(s) who		N
Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
Member	Jason Andrews		
	615 S College St, 8th Fioor : Charlotte, NC 28202		
		<del></del>	
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(Use attachments if neces	ssary)		
9. Attached is a certificate	e of existence, no more than 90 days of	d, duly authenticated by the official h	aving custody of records in the
	of which it is organized. (If the certification)	cate is in a foreign language, a transla	tion of the certificate under oath
of the translator must be s	submitted)		
10. This document is exec	cuted in accordance with section 605.0	203 (1) (b), Florida Statutes. I am awa	re that any false information
submitted in a document t	o the Department of State constitutes a	third degree felony as provided for in	is.817.155, F.S.
			····
	Signe	ture of un authorized person	
	,	ason Andrews	
		d or printed name of signor	

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# NORTH CAROLINA (((H190) Department of the Secretary of State

## CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

#### NEXT HOME LOANS LLC

is a limited liability company duly formed, and existing under the laws of the State of North Carolina, having been formed on 2nd day of April, 2019

I FURTHER certify that, as of the date of this certificate, (i) the said limited liability company is not dissolved under the terms of its articles of organization, (ii) the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina, (iii) that said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act, (iv) that this office has not filed any decree of judicial dissolution, articles of dissolution, articles of merger, or articles of conversion for said limited liability company.





Scan to verify online.

Certification# 105287080-1 Reference# 15495114- Page: 1 of 1 Verify this certificate online at http://www.sosnc.gov/verification

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 12th day of July, 2019.

Elaine I. Marshall

Secretary of State

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