

10/12/22, 1:58 PM

Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (954)208-0845

Fax Number : (614)573-3996

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

Email Address: \_\_\_\_\_

Foreign Limited Liability Company

ACORE Capital Mortgage GP, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

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Corporate Filing Menu

S. FRANKLIN  
Help 13 2022

DocuSign Envelope ID: 1AB41927-44EB-465C-952E-C5CE4A501937

# 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. ACORE Capital Mortgage GP, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 35-2534511

(F.L.L. number, if applicable)

4.

(State first transacted business in Florida, if prior to registration)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability.)

80 East Sir Francis Drake Blvd. Suite 2A

5. (Street Address of Principal Office)

Larkspur, CA 94939

80 East Sir Francis Drake Blvd. Suite 2A

6. (Mailing Address)

Larkspur, CA 94939

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida

(City)

, Florida

33324

(Zip code)

## Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Katherine Schneider, Asst. Secretary

(Registered agent's signature)

*Katherine Schneider*

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8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage (up to six (6) total):

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: <u>Perry Stewart Ward</u>	<input checked="" type="checkbox"/> Manager	Name: <u>Christopher Tokarski</u>
<input type="checkbox"/> Member	Address: <u>80 East Sir Francis Drake Blvd.</u>	<input type="checkbox"/> Member	Address: <u>80 East Sir Francis Drake Blvd.</u>
<input type="checkbox"/> Authorized	<u>Suite 2A, Larkspur, CA 94939</u>	<input type="checkbox"/> Authorized	<u>Suite 2A, Larkspur, CA 94939</u>
Person	<u></u>	Person	<u></u>
<input type="checkbox"/> Other	<u></u>	<input type="checkbox"/> Other	<u></u>
<input checked="" type="checkbox"/> Manager	Name: <u>Boyd Fellows</u>	<input checked="" type="checkbox"/> Manager	Name: <u>Warren de Haan</u>
<input type="checkbox"/> Member	Address: <u>80 East Sir Francis Drake Blvd.</u>	<input type="checkbox"/> Member	Address: <u>80 East Sir Francis Drake Blvd.</u>
<input type="checkbox"/> Authorized	<u>Suite 2A, Larkspur, CA 94939</u>	<input type="checkbox"/> Authorized	<u>Suite 2A, Larkspur, CA 94939</u>
Person	<u></u>	Person	<u></u>
<input type="checkbox"/> Other	<u></u>	<input type="checkbox"/> Other	<u></u>
<input type="checkbox"/> Manager	Name: <u>David Cordova</u>	<input type="checkbox"/> Manager	Name: <u>Lawrence Taylor</u>
<input type="checkbox"/> Member	Address: <u>80 East Sir Francis Drake Blvd.</u>	<input type="checkbox"/> Member	Address: <u>80 East Sir Francis Drake Blvd.</u>
<input checked="" type="checkbox"/> Authorized	<u>Suite 2A, Larkspur, CA 94939</u>	<input checked="" type="checkbox"/> Authorized	<u>Suite 2A, Larkspur, CA 94939</u>
Person	<u></u>	Person	<u></u>
<input type="checkbox"/> Other	<u></u>	<input type="checkbox"/> Other	<u></u>

**Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

DocuSigned by:

*Lawrence Taylor*

CE0C28BDE0004A9

Signature of an authorized person

Lawrence Taylor

Typed or printed name of signer

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY "ACORE CAPITAL MORTGAGE GP, 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 TWELFTH DAY OF OCTOBER, A.D. 2022.

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

2022 OCT 12 PM 11:08



A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

5757583 8300

SR# 20223752107

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 204604056

Date: 10-12-22