# M 22100 015966

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



300394053183

7' 17 FT 4: 55 2022 OCT 17 PH 2: 5:

S. FRANKLIN NOT 18 2022

## FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

10/14/22

NAME:

PROMPT MORTGAGE, LLC

TYPE OF FILING: APPLICATION

COST:

125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

**AUTHORIZATION: ABBIE/PAUL HODGE** 

#### COVER LETTER

	Nam	e of Limited Liability Company	-
		Company for Authorization to Transact Business in Florida, referenced foreign limited liability company to transact busi	
return all corre	espondence concerning this matter t	o the following:	
JO	HN VARGHESE		
		Name of Person	-
Pro	ompt Mortgage,LLC		
	<del></del>	Firm/Company	-
921	0 FM 1092 (Murphy Road) Ste 207		
		Address	-
Str	offord, TX 77477		18.2
		ity/State and Zip Code	
JOH	° N@PROMPTMORTGAGECOMP	•	
	E-mail address: (to be	used for future annual report notification)	- :
rther information	on concerning this matter, please ca	n:	- <u>.</u>
JOHN VAR	,	832 735-5555	
	Name of Contact Person	at () Area Code Daytime Telephone Number	-
Mailing Address:		Street Address:	
Registration Section		Registration Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327		The Centre of Tallahassee	
Lahanasse	e. FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

# 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: Prompt Mortgage, 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.") TX51-0557286 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 920 FM 1092 (Murphy Road) Ste 207 920 FM 1092 (Murphy Road) Ste 207 (Street Address of Principal Office) (Mailing Address) Stafford, TX 77477 Stafford, TX 77477 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Paracorp Incorporated Name: 155 Office Plaza Drive, 1st Floor Office Address: Tallahassee (City) 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.

(Registered agent's signature)

See Attached

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]: Title or Capacity: Name and Address: Title or Capacity: Name and Address: JOHN VARGHESE ■ Manager Name: ■ Manager Address: \_\_\_ □Member □Member Address: 920 FM 1092 (Murphy Road) Ste 207 ☐ Authorized ☐ Authorized Stafford, TX 77477 Person Person □Other □Other □Other Other □Manager Name: \_\_\_\_\_ □Manager Name: □ Member Address: □Member Address: \_\_\_\_\_ ☐ Authorized ☐ Authorized

Person

□Manager

☐ Member

□Authorized

Person

□Other\_\_\_\_\_

□Other\_\_\_\_\_\_

Other\_\_\_\_

□Other\_\_\_\_\_

Name:

Address: \_\_\_\_

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.

□Other\_\_\_\_

□Other\_\_\_\_

Name: \_\_\_\_\_

Address:

- 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.

Signature of an authorized person

Person

□Other

□Manager

□Member

□ Authorized

Person

### STATE OF FLORIDA

#### REGISTERED AGENT CONSENT FORM

**DATE:** 10/14/2022

**ENTITY NAME:** Prompt Mortgage, LLC

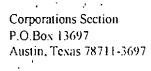
#### REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statues.

Leticia Herrera, Assistant Secretary

Paracorp Incorporated





## Office of the Secretary of State

#### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Organization for PROMPT MORTGAGE, LLC (file number 800556464), a Domestic Limited Liability Company (LLC), was filed in this office on October 11, 2005.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on August 10, 2022.



Phone: (512) 463-5555

Prepared by: SOS-WEB

John B. Scott Secretary of State

Come visit us on the internet at https://www.sos.texas.gov/

Fax: (512) 463-5709 Dial: 7-1-1 for Relay Services
TID: 10264 Document: 1168727560002