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PERRIE, BUKER, JONES & MORTON, P.C.

Attorneys At Law South Terraces, Suite 170 115 PERIMETER CENTER PLACE ATLANTA, GEORGIA 30346-1238 (770) 804-0500

Richard W. Jones

FAX (770) 804-0509 email: jones@corplaw.net

June 17, 1998

Division of Corporations Florida Secretary of State Post Office Box 6327 Tallahassee, Florida 32314

Re:

Application for Certificate of Authority -- CoreLogic, LLC [PBJ&M File No. 2598.00]

Dear Sir/Madam:

On behalf of CoreLogic, LLC, I am enclosing the following:

- One (1) original and one (1) exact copy of an application for a Gerificate of 1. Authority;
- One (1) original and one (1) exact copy of a Certificate of Designation of 2. . Registered Agent/Registered Office;

3. A Georgia Certificate of Existence;

4. A check in the amount of \$293.75, payable to the order of the Riorida Department of State, which amount includes the applicable filing fees and file fee for a Certificate of Status.

Please process this filing in your normal manner. Please call me at the above-noted telephone number if you need additional information.

Thank you for your cooperation.

700002568277---06/22/98--01111--001 ****293.75 ****293.75

Sincerely,

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80/48/0 Mame 🕆 əilabil**ity** QGCu rent nor DCC DCC Enclosures a er verayer WPD\RWJ\98MAYCOR\RWJ3112.2:lbk Acknowledgement نابان W. P. Verifyer



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

June 24, 1998

RICHARD W. JONES PERRIE BUKER JONES & MORTON, P.C. 115 PERIMETER CENTER PLACE, SUITE 170 ATLANTA, GA 30346-1238

SUBJECT: CORELOGIC, LLC Ref. Number: W98000014448

We have received your document for CORELOGIC, LLC and your check(s) totaling \$293.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must provide this office with the agreed value and a written description of the property and/or services you refer to in your affidavit. You may amend your affidavit to include this description or include an attachment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6913.

Diane Cushing Corporate Specialist

Letter Number: 198A00034636

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

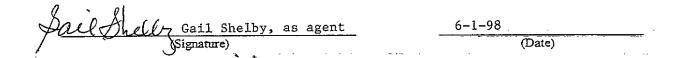
1. Name or	CoreLogic, LIC f foreign limited liability company m	aust end with the wor	rds "limited company" or their a	bbreviation "L.C." if not
2(Jurisdict	Georgia tion under the law of which foreign living sorganized)			· •
4	March 10, 1998 (Date of Organization)	- (Perpetual (Duration: Year limited liability exist or "perpetual")	company will ease to
6. <u></u>	Upon qualification (Date first transacted business	in Florida. (See sect	ions 608.501, 608.502, and 817,	
7	3277 Highborne Circle			ESS € G
<u> </u>	Marietta, GA 30066	-		ATE RIDA
8. List nam will man	ne, title, and business address of	Street address of pri each managing rocompany in Flor	nember[MGRM] or manao	er[MGR]who
8. List nam will man	ne, title, and business address of nage the foreign limited liability NAME & ADDRESS:	each managing r	nember[MGRM] or manao	ger[MGR]who e if necessary) TITLE:
8. List nam will man	ne, title, and business address of nage the foreign limited liability	each managing rocompany in Flor	nember[MGRM] or manag rida: (attach additional page	e if necessary)
8. List nam will man	ne, title, and business address of nage the foreign limited liability NAME & ADDRESS:	each managing roompany in Flor	nember[MGRM] or manag rida: (attach additional page	e if necessary)
8. List nam will man	ne, title, and business address of nage the foreign limited liability NAME & ADDRESS: William Pawlowski	each managing roompany in Flor	nember[MGRM] or manag rida: (attach additional page	e if necessary)
8. List nam will man	ne, title, and business address of nage the foreign limited liability NAME & ADDRESS: William Pawlowski 3277 Highborne Circle	each managing roompany in Flor	nember[MGRM] or manag rida: (attach additional page	e if necessary)
8. List nam will man	ne, title, and business address of nage the foreign limited liability NAME & ADDRESS: William Pawlowski 3277 Highborne Circle	each managing roompany in Flor	nember[MGRM] or manag rida: (attach additional page	e if necessary) TITLE:
8. List nam will man	ne, title, and business address of nage the foreign limited liability NAME & ADDRESS: William Pawlowski 3277 Highborne Circle	each managing roompany in Flor	nember[MGRM] or managrida: (attach additional page	e if necessary) TITLE:
8. List nam will man	ne, title, and business address of nage the foreign limited liability NAME & ADDRESS: William Pawlowski 3277 Highborne Circle	each managing roompany in Flor	nember[MGRM] or managrida: (attach additional page	e if necessary) TITLE:

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the Limited Liability Company is:			
_	CoreLogic, LLC			
2.	The name and address of the registered agent and office are:			
	Corporation Service Company (Name)	<u> </u>	SECRE	au 122 -
	1201 Hays Street (P.O. Box or Mail Drop Box NOT ACCEPTABLE)		TARY OF S	FILED
	Tallahassee, Florida 32301 (City/State/Zip)		TATE ORIGA	

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



Filing Fee: \$ 35 for Designation of Registered Agent

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of a member ofCoreLogic	, .IIC
deposes and says:	
1) the above named limited liability company has at least two members	
2) the total amount of cash contributed by the member(s) is	\$ 1, 200
3) if any, the agreed value of property other than cash contributed by member(s) is A description of the property is attached and made a part hereto.	\$ 1,000
4) the amount of cash or property anticipated to be contributed by member(s) is This total includes amounts from 2 and 3 above.	\$ 2,000
5) the total amount of cash or property anticipated to be contributed by member(s) is	\$ <u>2,000</u>
Signature of a member or authorized representative of a member (In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts, stated herein are true.)	FILED 98 JUL 21 PM 1: 0 SECRETALE OF STATE

Filing Fee: \$250.00 for Application and Affidavit



July 10, 1998

Richard Jones
Perrie Buker Jones & Morton, P.C.
115 Perimeter Center Place, Suite 170
Atlanta, Ga. 30346-1238

Subject: CoreLogic, LLC - Property Description

This letter is in response to the memo from the Florida Department of State requesting a description of the property and/or services for membership of a foreign LLC in Florida. The following is a list of the items that contribute to the \$1,000 value of property:

- 2 desks	\$	500
- 2 chairs	\$	250
- File cabinets	S	100
- Phone	\$	100
- Misc equip	\$	50
TOTAL	.\$.000

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If you have any questions concerning the above information, please call me at (770) 420-5209.

Bill Pawlowski

CoreLogic, LLC

President & CEO

Secretary of State Corporations Division Suite 315, West Comer 2 Martin Luther King Ir. Ar. Atlanta, Georgia 30334-1530

DOCKET NUMBER : 981120498
CONTROL NUMBER : 9809363
DATE INC/AUTH/FILED: 03/10/1998
JURISDICTION : GEORGIA
PRINT DATE : 04/22/1998

FORM NUMBER : 211

PERRIE, BUKER, JONES & MORTON, P.C. ATTN: RICHARD W. JONES 115 PERIMETER CNTR PL SO. TERRACE #170 ATLANTA GA 30346-1238 98 JUL 21 PH 1: 50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF EXISTENCE

I, Lewis A. Massey, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

CORELOGIC, LLC A GEORGIA LIMITED LIABILITY COMPANY

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation, or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up, or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

LEWIS A. MASSEY
SECRETARY OF STATE

