

# F02 000003491

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** I-net Mortgage Corporation  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Renee Forshee  
(Name of Person)

I-net Mortgage Corporation  
(Firm/Company)

7050 So. Union Park Center #480  
(Address)

Midvale UT 84047  
(City/State and Zip code)

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 DEPARTMENT OF STATE  
 TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

200006252912--6  
 -07/08/02--01070--012  
 \*\*\*\*\*78.75 \*\*\*\*\*78.75

Ryan Jaussi at (801) 566-7077  
 (Name of Person) (Area Code & Daytime Telephone Number)

Renee Forshee

**STREET ADDRESS:**  
 Registration Section  
 Division of Corporations  
 409 E. Gaines St.  
 Tallahassee, FL 32399

**MAILING ADDRESS:**  
 Registration Section  
 Division of Corporations  
 P.O. Box 6327  
 Tallahassee, FL 32314

F02-3491  
 OK

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. I-net Mortgage Corporation  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Utah 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10-31-1997 5. perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. upon approval  
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 7050 So Union Park Center #480  
Midvale UT 84047  
(Current mailing address)

8. Residential Mortgage Broker  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida, 33324  
(Zip code)

**10. Registered agent's acceptance:**

Having been named as registered agent and to accept service of process for the above stated corporation 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.

CT Corporation System  
Hiedi M. Kusch  
(Registered agent's signature) Asst. Secy.

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

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TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

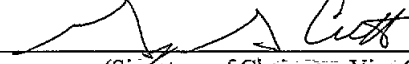
Chairman: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Vice Chairman: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Director: *none* \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Director: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_

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B. OFFICERS

President: *Gregory S. Cutt* \_\_\_\_\_  
 Address: *3093 Fawn Drive* \_\_\_\_\_  
*Park City UT 84098* \_\_\_\_\_  
 Vice President: *none* \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Secretary: *none* \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Treasurer: *none* \_\_\_\_\_  
 Address: \_\_\_\_\_

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.  \_\_\_\_\_  
 (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. *Gregory S. Cutt* *President* \_\_\_\_\_  
 (Typed or printed name and capacity of person signing application)



Utah Department of Commerce  
Division of Corporations & Commercial Code  
160 East 300 South, 2nd Floor, S.M. Box 146705  
Salt Lake City, UT 84114-6705  
Service Center: (801) 530-4849  
Toll Free: (877) 526-3994 Utah Residents  
Fax: (801) 530-6438  
Web Site: <http://www.commerce.utah.gov>

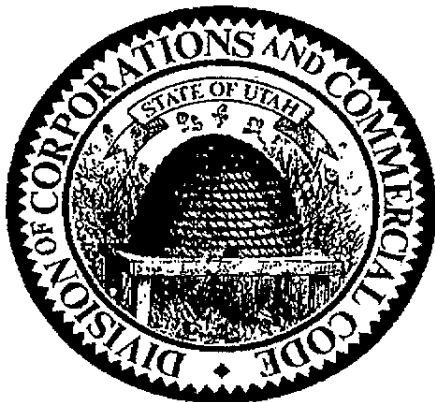
May 16, 2002

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## CERTIFICATE OF EXISTENCE

**Registration Number:** 1379272-0142  
**Business Name:** I-NET MORTGAGE CORPORATION  
**Registered Date:** OCTOBER 31, 1997  
**Entity Type:** DOMESTIC PROFIT CORPORATION  
**Current Status:** GOOD STANDING

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah.



*Kathy Berg*

Kathy Berg  
Director  
Division of Corporations and Commercial Code

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Dept. of Professional Licensing (801) 530-6628	Real Estate (801) 530-6747	Public Utilities (801) 530-6651	Securities (801) 530-6600	Consumer Protection (801) 530-6601
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