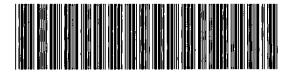
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Special Instructions to	Filing Officer:		
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IGATE MORTGAGE SERVICES INC

TYPE OF FILING: APPLICATION

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ACCOUNT: **FCA000000015**

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO: New Filing Sect Division of Cor				
	Iortgage Services Inc	•		
SCHOLECT.	Name of corpora	tion - must include suffix		
Dear Sir or Madam:				
"Certificate of Existence		for Authorization to Transa Standing" and check are sub siness in Florida.		
Please return all corresp	ondence concerning this m	atter to the following:		
Stacle Childerston				
	Name	of Person		
Wolz Corporate US	SA, Inc.			
	Firm/0	Company		
36 South 18th Ave	nue, Suite D			
	A	ddress	,Eig.	4
Brighton, Colorado	80601			2d 3d 3d 3d 3d 3d 3d 3d 3d 3d 3d 3d 3d 3d
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compliance@wolz	-			ر <u>ت</u> **
	E-mail address: (to be us	sed for future annual report	notification) ュデー	IA IE
For further information	concerning this matter, plea	ase call:	notification)	8:24
Stacie Childerston	at (303	655-9659		
Name of Person	n A	rea Code & Daytime Teleph	one Number	
New Filing Sect Division of Con Clifton Building 2661 Executive Tallahassee, FL	porations Center Circle 32301	MAILING A New Filing Se Division of Co P.O. Box 632 Tallahassee, F	ection prporations 7	
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.

	orporation; must include "INCORPORATED, orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)
Delaware	3.	46-2451364
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)
4-3-2013	5.	Perpetual
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
Upon regis	tration.	
	Drive, Fremont, CA 94555 (Principal office add Drive, Fremont, CA 94555	lress)
	(Current mailing add	lress)
Mortgage L	oan Origination & Servicing	
(Purpose(s) of corporation authorized in home state or co	ountry to be carried out in state of Florida)
Name and stre	et address of Florida registered agent: (P.	O. Box NOT acceptable)
	Registered Agent Solutions, Ir	nc. STATE
Name:		
	155 Office Plaza Dr. Suite A	
Name:	155 Office Plaza Dr. Suite A Tallahassee	

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.

(Registered agent's signature)

Eric Wolz, Assistant Secretary

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.

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12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Suresh Kumar Kunnumal Address: 6528 Kaiser Drive, Fremont, CA 94555 Vice Chairman: Kanetha Dodd Address: 6528 Kalser Drive, Fremont, CA 94555 Director: B. OFFICERS President: Suresh Kumar Kunnumal 6528 Kaiser Drive, Fremont, CA 94555 Vice President: **Kanetha Dodd** Address: 6528 Kaiser Drive, Fremont, CA 94555 Treasurer: ___ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that 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.

(Typed or printed name and capacity of person signing application)

14. Suresh Kumar Kunnumal - President

PAGE

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "IGATE MORTGAGE SERVICES INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF APRIL, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "IGATE MORTGAGE SERVICES INC." WAS INCORPORATED ON THE THIRD DAY OF APRIL, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

5313579 8300

130478402

Jeffrey W. Bullock, Secretary of State AUTHENTICATION: 0383293

DATE: 04-24-13

You may verify this certificate online at corp.delaware.gov/authver.shtml