To: Qualification/Tax Lien Section Division of Corporations MORTGAGE SUBJECT: (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: Should you need to call someone concerning this matter, please call: at (609) 985-7200 (Name of Person) (Area Code & Daytime Telephone Number) STREET ADDRESS: **MAILING ADDRESS:** Qualification/Tax Lien Section Qualification/Tax Lien Section Division of Corporations Division of Corporations 409 E. Gaines St. P.O. Box 6327 Tallahassee, FL 32399 Tallahassee, FL 32314 Enclosed is a check for the following amount: □ \$70.00 Filing Fee **5** \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certificate of Status Certificate of Status & Certified Copy

Certified Copy



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 23, 1999

SUSAN LANGE REDWOOD MORTGAGE PO BOX 65 MARLTON, NJ 08053

SUBJECT: REDWOOD MORTGAGE CO.

Ref. Number: W99000004542

We have received your document for REDWOOD MORTGAGE CO. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 487-6958.

Letter Number: 799A00008322

Lee Rivers Document Specialist

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES. THE FOLLOWING IS SURMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA
(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.)
State or country under the law of which it is incorporated) 3. 23-2432375 (FEI number, If applicable)
(Date of incorporation) 5. QECCETUAL (Duration: Year corp. will cease to exist or "perpetual")
O CHAILLIA FOR ARPRICIAL From DOT. OF BANKING (Date first transacted histogram) (SEE SECTIONS 607, 1501, 607, 1502 and 817, 155, F.S.)
- 180 TUCKERTON Pd, Sto #8
Med Ford, NJ 08055 (Current mailing address)
MORTGAGE BROKERAGE GARKING BOS, DESPEN (Purpose(s) of corporation authorized in home state or country to be carried out in state of Floridance property and street address of Floridance agent: (P.O. Box or Mail Drop Box NOT acceptance) Name: MARY MECRATH Office Address: 114 Nor Folk Rd Tequesta FL (Zip code)
(i). 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) 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)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)
Chairman: SUSAN LANGE
Address: 180 TUCKENTON Rd. Ste #8
- med ford NJ 08055
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
P. OFFICIENC (CL., A. 11, L. B.O. B., MOT.,, (ALI)
B. OFFICERS (Street address only - P.O. Box NOT acceptable)
President: SUSAN LANGE 70 9
Address: 180 TUCKGRTON Rd. #8
med Ford, NJ 08055
Vice President:
Address:
Secretary:
Address:
Treasurer:
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)
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 14. SUSAN LANGE. President
14. VVVAN CANKC, IKES/AEM!

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

State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "REDWOOD MORTGAGE CO." 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 FIFTH DAY OF FEBRUARY,
A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID.

CORPORATION IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF

DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE

EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE

RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT

BUSINESS

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID REDWOOD

MORTGAGE CO WAS INCORPORATED ON THE ELEVENTH DAY OF AUGUST,

A.D. 1986.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID IS THE FIFTH DAY OF FEBRUARY, A.D. 1999 SNE 2



Edward J. Freel, Secretary of State

2098591 8300

AUTHENTICATION:

9562181

DATE:

02-05-99

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