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FORM **BCA 13.15** (rev. Dec. 2003) **APPLICATION FOR AUTHORITY TO TRANSACT BUSINESS IN ILLINOIS**Business Corporation Act

FILED

Jesse White, Secretary of State Department of Business Services Springfield, IL 62756 Telephone (217) 782-1834 www.cyberdriveillinois.com JUL 2 7 2005

Doc#: 0522102181 Eugene "Gene" Moore Fee: \$26.00

Cook County Recorder of Deeds
Date: 08/09/2005 10:31 AM Pg: 1 of 2

JESSE WHITE SECRETARY OF STATE

Remit payment in the form of a cashier's check, certified check, money order or an Illinois attorney's or CPA's check payable to the Secretary of State.

6433-973-7 File#

	able to the Secretary of State. E NOTE 1 CONCERNING PAY	MENT!							
Filir	ng Fee \$ 150 Franc	thise Tax \$ つくんつ F	Penalty/Interest \$	Total \$ 175,00	Approved:				
	Submit in duplic		clearly in black ink						
	O _A		_						
1.	(a) CORPORATE NAM	E: Quantum Servicing Corpo	oration						
	(Complete item 1 (b) only if the corporate name is not available in this state.)								
	(b) ASSUMED CORDO	DATE MAE: N/A							
	(b) ASSUMED CORPORATE NAME: N/A (By electing this assumed name, the corporation hereby agrees NOT to use its corporate name in the								
	transaction of business in Illinois. For n BCA 4.15 is attached.)								
2.	State or Country	Drue of		Period of					
	of Incorporation Delaware	; Incorp	ation <u>06/07/05</u>	_; Duration perpetual					
3.	(a) Address of the princ	ipal office, wherever locat	ed: (b) Address of	principal office in Illinois:					
	(If none, so state)								
	2 Corporate Drive		Nore						
	Chalter CT 06494								
	Shelton, CT 06484								
	•								
4.	Name and address of the registered agent and registered office in Illinois.								
				\(\mathcal{G} \)					
	Registered Agent: Nation	al Registered Agents, Inc	·						
		First Name	Middle Initial	i ast nar	ne				
	Registered Office:	200 West A			4 (A P.O. Box alone				
		Number Chicago II 600	Street	Suite ‡ Cool:	is not acceptable.)				
		Chicago, IL 600	ZIP Code		 				
		City	ZIF Code	County	<u>/</u>				
5.	States and countries in w	nich it is admitted or qualif	ied to transact business:	(Include state of incorpora	ation)				
		non it is admitted or quain	ica to transact basiness.	include state of incorpora	ationi				
Del	aware		·	······································					
6.	Name and addresses of c	fficers and directors: (If me	ore than 3 directors and/o	or additional officers, attac	ch list.)				
•		`		,	,				
	Name	No. & Street	City	Stat	te ZIP				
	President John W. Anders		Shelton,	CT	06484				
	Secretary Steven Cohen,	2 Corporate Drive,	Shelton,	CT	06484				
		on II, 2 Corporate Drive,	Shelton,	CT					
	Director Steven Cohen,	2 Corporate Drive,	Shelton,	CT	06484				

Director

N/A

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7. The purpose or purposes for which it was organized which it proposes to pursue in the transaction of business in this state: (If not sufficient space to cover this point, add one or more sheets of this size)

Providing loss mitigation and workout services for mortgage loans.

8.	Authorized and issued shares:			Number of Shares	Number of Shares	
Con	Class Series mmon N/A		Par Value \$0.01 per share	Authorized 100	Issued	
		Ĉ,	(If mor	e, attach list)		
9.	Paid-in Capi ("Paid-in Ca				qual to the total of these accounts.)	
10.	corporat (b) Give an corporat (c) State the transact (d) State the	tion for the follow estimate of the tion for the follow e estimated tota red by it everywh e estimated ann	total value of all the proportion year: total value of all the proportion year that value be local business of the corporal lere for the following year ual business of the corporal m places of business in the	erty* of the ated in Illinois: \$tion to be r: \$	/NH 10 2287, 475	
11.	Interrogatories: (Important - this section must be completed.) (a) Is the corporation transacting business in this state at this time? Nr. (b) If the answer to item 11(a) is yes, state the exact date on which it commenced to transact business in Illinois:					
12.	This application is accompanied by a certified copy of the articles of incorporation, as amended, duly authenticated, within the last ninety (90) days, by the proper officer of the state or country wherein the corporation is incorporated.					
13.	The undersigned corporation has caused this application to be signed by a duly authorized officer, who affirms, under penalties of perjury, that the facts stated herein are true. (All signatures must be in BLACK INK.)					

Dated ____

(Any Authorized Officer's Signature)
John W. Anderson, II Pres./Treas./Dir.

(Print Name and Title)

or mixed without qualifications.

* PROPERTY as used in this application shall apply to all property of the corporation, real, personal, tangible, intangible,

Quantum Servicing Corporation

Note 1: Payment in connection with this application must be in the form of a certified check, cashier's check, Illinois attorney or CPA's check or money order made payable to the "Secretary of State". The minimum fee due upon qualification is \$175. Any additional fees will be billed and must be paid before this application can be filed.

200 West Adams Street Suite 2007 Chicago, IL 60606

(Exact Name of Corporation)