UNOFFICIAL CO

5817-778-4 File Number

Doc#: 0814122081 Fee: \$46.00 Eugene "Gene" Moore Gook County Recorder of Deeds

Date: 05/20/2008 12:02 PM Pg: 1 of 6

Office of The Secretary of State

Whereas.

INCORPORATED UNDER THE LAWLE OF THE STATE OF ILLINOIS HAVE BEEN FILED IN THE OFFICE OF THE SECRETARY OF STATE AS PROVIDED BY THE BUSINESS CORPORATION ACT OF ILLINOIS, IN FORCE JULY 1, A.D. 1984.

Now Therefore, I, George H. Ryan, Secretary of State of the State of Illinois, by virtue of the powers vested in me by law, do hereby issue this certificate and attach hereto a copy of the Application of the aforesaid corporation.

In Testimony Whereof, I hereto set my hand and cause to be



affixed the Great Seal of the State of Illinois, at the City of Springfield, this _____ 27TH day of ______ A.D. 19 _95 and of the Independence of the United States the two hundred and 19TH

Deorge 4 Kyan

Secretary of State

BCA-2.18

Form

Forr	والمراوية	This space for use by Secretary of S	late	
(Rev. Jan. 1991) George H. Ryan * Secretary of State			SUBMIT IN DUP	
pring	tment of Business Services glield, IL 62756	JAN 2 7 1995	This space for Secretary of Date /- 2 7	State
1eck	ent must be made by certified c, cashler's check, Illinois attor- check, Illinois C.P.A's check or by order, payable to "Secretary ate."	GEORGE H. RYAN SECRETARY OF STATE	Franchise Tax \$ Filing Fee \$ Approved:	25.00 75.00 00.00
•	CORPORATE NAME:	Metro Mortgage Services.	Inc. Bl	8
	(The corporate name must cuntal	n the word "corporation", "company," "incorporated,	"limited" or an abbreviation thereof.)	
	Initial Registered Agent:	- LIBI Marria	Jerome Last na.	me
	Initial Registered Office:	Mitwon	Street Suite	,
)89 Lake p Code Coun	ity
3.	(if not sufficient space to cover to	hich the corporation is organized: his point, add one or more sheet, of this size.) terage of residential mort	gages.	
	(If not sufficient space to cover to	erage of residential mort	45	
· · ·	The brok Paragraph 1: Authorized	Shares, Issued Shares and Consideration	Received:	nsideration to be seived Therefor
	The brok	Shares, Issued Shares and Consideration Number of Shares Authorized	Received:	nsideration to be selved Therefor
	Paragraph 1: Authorized Services Class Paragraph 1: Authorized Services Paragraph 1: Authorized Paragraph 1: Au	Shares, Issued Shares and Consideration Number of Shares Authorized	Received: Number of Sharzo Proposed to be (ssuec) 10 \$	seived Therefor
3.	Paragraph 1: Authorized S Class Par Value per Share A \$ 100. Paragraph 2: The preference of each class are: (If not sufficient space to cover to	Shares, Issued Shares and Consideration Number of Shares Authorized	Received: Number of Sharzo Proposed to be (ssuec Re- 10 TOTAL = \$ 1 and special or relative rights in resp	,000.00
4.	Paragraph 1: Authorized 3 Class Par Value per Share A \$ 100. Paragraph 2: The prefere of each class are: (If not sufficient space to cover	Shares, Issued Shares and Consideration Number of Shares Authorized 1.0 1.0 1.0 1.0 1.0 1.0 1.0 1.	Received: Number of Sharzo Proposed to be (ssuec Re- 10 TOTAL = \$ 1 and special or relative rights in resp	,000.00 pect of the she

	(a) Number of cirecum constituting the initial beard of directors of he corporation: (b) Names and addresses of the persons who are to serve as directors until the first annual number of the persons who are to serve as directors until the first annual number of the persons who are to serve as directors until the first annual number of the persons who are to serve as directors until the first annual number of the persons who are to serve as directors until the first annual number of the persons who are to serve as directors until the first annual number of the persons who are to serve as directors until the first annual number of the persons who are to serve as directors until the first annual number of the persons who are to serve as directors until the first annual number of the persons who are to serve as directors until the first annual number of the persons who are to serve as directors until the first annual number of the persons who are to serve as directors until the first annual number of the persons who are to serve as directors until the first annual number of the persons who are to serve as directors until the first annual number of the persons who are to serve as directors until the first annual number of the persons who are the persons where the persons where the persons who are the persons where the persons wh				
	shareholders or un	til their successors are electe	ed and qualify:		city, State, ZiP
	Name				
المناحدة المناسبين					
6. OPTIONAL:	corneration for the	the value of all property to b following year wherever loca	itea Mili De:	5	
	(b) It is estimated that	the value of the property to b	e located mittill	s	
	(c) It is estimated that	during the following year will the gross amount of busin	ess (nat will de	_	
	transacted by the	corporation during the following the gross amount of busing	Uð Asst Mill nar	· ·	
	aransacted from pla	aces of business in the State	of Illinois during	,	
	the following year	will be:			
8.	NAME(S) 8	requirements, fixing a durati	PORATOR	(8)	
The undersi Articles of Inco	gned incorporator(s) here rporation are true.	by declare(s), under penaltic	s of perjury, the	it file Statemente me	
Dated	January 10	18205.			
	Signature and Nan	19	4F44	Address	
1. Signatur	CAN ST. X PIC		Street	dywyn Lane	
•	Edith Raderom	<u>e</u>	Buffalo	Grove, IL State	60089 Zip Code
2	or Print Name)	2.			
Signatu	ire		Street		المستعبرة النبية في والمستعبرة
	- O' Mome		City/Town	State	Zip Code
(Typ# 0	r Print Name)		Cultura C	<i>/</i> -/	E.P 0000
3 Signatu		<u> </u>	Street	7	
3 Signatu	ire .		Street City/Town	TS SUCTO	Zip Code
3. Signatu (Type o	or Print Name) by in ink on original document	Carbon copy, photocopy or rubber	Street City/Town stamp signatures r	nsy only be lead in con	Zip Code
3. Signatu (Type o	or Print Name) by in ink on original document		Street City/Town stamp skynatures r d the state of inoc by its secretary o	nsy only be lead in con	Zip Code
Signatures must NOTE: If a corp shall be by its p	or Print Name) by in ink on original document poration acts as incorporator president or vice president a	Caibon copy, photocopy or rubber, the name of the corporation and verified by him, and attested	Street City/Town stamp signatures r d the state of inoc by its secretary o	Sine nay only be used in con proporation shall be und r assistant secretary.	Zip Code stormed copies.) own and the executio
Signatures must NOTE: If a corp shall be by its p	or Print Name) by in ink on original document poration acts as incorporator president or vice president at	Carbon copy, photocopy or rubber, the name of the corporation and verified by him, and attested	Street City/Town stamp signatures r d the state of inoc by its secretary o	Sine nay only be used in con proporation shall be und r assistant secretary.	Zip Code stormed copies.) own and the executio
Signatures must NOTE: If a corp shall be by its p The initial state, with The filling The minitial (Applies	pr Print Name) by in ink on original document poration acts as incorporator president or vice president as in assessed as in a minimum of \$25. If the is \$75. Imum total due (franchise to when the Consideration to be	Carbon copy, photocopy or rubber, the name of the corporation and verified by him, and attested FEE SCHEDU the rate of 15/100 of 1 percent (ax + filling fee) is \$100. e Received as set forth in item	Street City/Town stamp signatures r d the state of inor by its secretary o LE \$1.50 per \$1,000	nsy only be used in conprendict shall be under assistant secretary. on the paid-in capital display and \$16,607)	Zip Code stormed copies.) ewn and the executio
Signatures must NOTE: If a corp shall be by its p The initial state, with The filling The minitial (Applies	pr Print Name) by in ink on original document poration acts as incorporator president or vice president as in assessed as in a minimum of \$25. If the is \$75. Imum total due (franchise to when the Consideration to be	Carbon copy, photocopy or rubber, the name of the corporation and verified by him, and attested FEE SCHEDU the rate of 15/100 of 1 percent	Street City/Town stamp signatures r d the state of inor by its secretary o LE \$1.50 per \$1,000	nsy only be used in conprendict shall be under assistant secretary. on the paid-in capital display and \$16,607)	Zip Code stormed copies.) ewn and the executio

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FORM BCA 5.10/5.20 (rev. Dec. 2003) STATEMENT OF CHANGE OF REGISTERED AGENT AND/OR REGISTERED OFFICE Business Corporation Act

☆ \

Jesse White, Secretary of State
Department of Business Services
501 S. Second St., Rm. 350
Springfield, IL 62756 SECRETARY OF STATE JESSE WHITE FILED 03/31/08
217-782-3647
www.cyberdriveillinois.com

Remit payment in the form of a check or money order payable to Secretary of State

to s	Secretary of State.			
	<i>N</i>	File #	1817-7784	Filing Fee: \$25 Approved: SG
	Submit in ri	policate — Type or Pi	int clearly in black ink ———	- Do not write above this line ———
			•	THE R THE REPORT OF SECURE
1.	Corporate Name:	METPS MORTGAGE SE	ERVICES, INC.	CP0158989
2.	State or Country of In	corporation. ILLIN	OIS	
3.	Name and Address of Secretary of State (be		egistered Office as they appea	ar on the records of the Office of the
	Registered Agent:	EDIE		JEROME
		First Name	Middle Name	Last Name
	Registered Office:	1501 Brandywyn I	Lane O	
		Number	Street	Suite # (P.O. Box alone is unacceptable)
		Buffalo Grove	. 6J089	xOxxxx Lake
		City	ZIP (oc 3	County
ļ.	Name and Address of	f Registered Agent and Re	egistered Office shall be (affic	all changes herein reported):
	Registered Agent:	MORRIS	G.	DYNER
	riogistorad Agent	First Name	Middle Name	Last Name
	Registered Office:	190 S. LaSalle	Street	2850
		Number	Street	Suite (P.C. Box alone is unacceptable)
		Chicago	60603	Crok
		City	ZIP Code	⊘ υ, inty
5.	The address of the rebe identical.	egistered office and the ad	dress of the business office o	f the registered agent, as changed, will
õ.	The above change wa	as authorized by: ("X" one	box only)	

SEE REVERSE FOR SIGNATURE(S).

a.

Resolution duly adopted by the board of directors. (See Note 5 on reverse.)

b. La Action of the registered agent. (See Note 6 on reverse.)

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7. If authorized by the board of directors, sign here. (See Note 5 below.)

The undersigned corporation has caused this statement to be signed by a duly authorized officer who affirms, under penalties of perjury, that the facts stated herein are true and correct.

Dated		_	METRO MUNICAGE SERVICES, INC.
	Month & Day	Year	Exact Name of Corporation
***	Any Authorized Officer's Signatur	re	
_	Name and Title (type or print)		
If chang The und	ge of registered office by registe dersigned, under penalties of perjui	red agent, sig ry, affirms that	the activated herein are true and correct.
Dated	February 6,	2008	William Q
	Month & Day	Year	ignature of Registered Agent of Record
	0		EDIE JEROME
			Name (type or print)
			If Registered Agent is a corporation, Name and Title of officer who is signing on its behaff,

NOTES

- 1. The registered office may, but need not be, the same as the principal office of the corporation. However, the registered office and the office address of the registered agent must be the same.
- 2. The registered office must include a street of read address (P.O. Box alone is unacceptable).
- 3. A corporation cannot act as its own registered agent.
- 4. If the registered office is changed from one county to a lottler, the corporation must file with the Recorder of Deeds of the new county a certified copy of the Articles of Incorporation and a certified copy of the Statement of Change of Registered Office. Such certified copies may be obtained ONLY from the Secretary of State.
- 5. Any change of registered agent must be by resolution adopted by the board of directors. This statement must be signed by a duly authorized officer.
- 6. The registered agent may report a change of the registered office of the opporation for which he/she is a registered agent. When the agent reports such a change, this statement must be signed by the registered agent. If a corporation is acting as the registered agent, a duly authorized officer of such corporation must sign this statement.

7//CQ

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File Number

5817-778-4



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 17TH

day of

APRIL

A.D.

2008

Authentication #: 0810800335

Authenticate at: http://www.cyberdriveillinois.com

SECRETARY OF STATE