

State of Idaho

Office of the Secretary of State

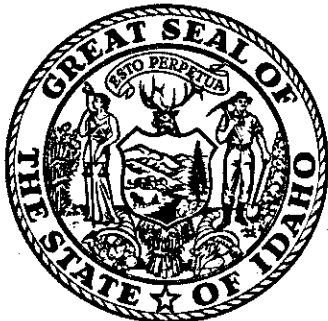
**CERTIFICATE OF AUTHORITY
OF
REVERSE MORTGAGE GROUP, INC.**

File Number C 176440

I, BEN YSURSA, Secretary of State of the State of Idaho, hereby certify that an Application for Certificate of Authority, duly executed pursuant to the provisions of the Idaho Business Corporation Act, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Authority to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: December 28, 2007



Ben Yursa

SECRETARY OF STATE

By *[Signature]*



APPLICATION FOR CERTIFICATE OF AUTHORITY (For Profit)

(Instructions on Back of Application)

07 DEC 28 AM 9:09
SECRETARY OF STATE
STATE OF IDAHO

The undersigned Corporation applies for a Certificate of Authority and states as follows:

- The name of the corporation is: Reverse Mortgage Group, Inc.
- The name which it shall use in Idaho is: 1st Reverse Mortgage Group, Inc
- It is incorporated under the laws of: WA
- Its date of incorporation is: 05/25/2006
- The address of its principal office is: 205 E 11th Street, Suite 104 Vancouver, WA 98660
- The address to which correspondence should be addressed, if different from item 5, is: _____
- The street address of its registered office in Idaho is: 8201 N Ainsworth Dr. Hayden, ID 83835
and its registered agent in Idaho at that address is: All day \$49 Idaho Registered Agent LLC

8. The names and respective business addresses of its directors and officers are:

Name	Office Held	Business Address
<u>Lynn M Russell</u>	<u>President</u>	<u>205 E 11 St Ste 104 Vancouver, WA 9866</u>
<u>Julie T Robinson</u>	<u>Vice President</u>	<u>205 E 11 St Ste 104 Vancouver, WA 9866</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Dated: 12-17-07

Signature: *Lynn M Russell*

Typed Name: Lynn M. Russell

Capacity: President
[The signer must be a director or an officer of the corporation.]

Customer Acct # :

(if using pre-paid account)

Secretary of State use only

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Revised 08/2005

IDAHO SECRETARY OF STATE
12/28/2007 05:00
CK: 1162 CT: 220911 BH: 1091883
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Web Form

C176440

UNITED STATES OF AMERICA

The State of



Washington

Secretary of State

I, SAM REED, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE/AUTHORIZATION

OF

REVERSE MORTGAGE GROUP, INC.

I FURTHER CERTIFY that the records on file in this office show that the above named Profit Corporation was formed under the laws of the State of WA and was issued a Certificate Of Incorporation in Washington on 5/25/2006.

I FURTHER CERTIFY that as of the date of this certificate, REVERSE MORTGAGE GROUP, INC. remains active and has complied with the filing requirements of this office.

Date: December 21, 2007

UBI: 602-608-755



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Sam Reed, Secretary of State