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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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SECRETARY OF STATE OF STATE OF CORPORATIONS

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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: City A	Funding Group orporation - must include suffix)
(Name of co	orporation - must include suffix)
Dear Sir or Madam:	
	tion for Authorization to Transact Business in Florida," tted to register the above referenced foreign corporation to
Please return all correspondence concerning this	s matter to the following:
Brian Fox	Name of Person) Pirm/Company) Curte 200 (Address) (Address)
()	Name of Person)
City Funding Group	
(F	Pirm/Company)
3745 W. Chasman Ava.	Puto 200
	(Address)
Orange CA 9281	88
(City	y/State and Zip code)
For further information concerning this matter, p	please call:
(Name of Person)	714) 221 - 2770 (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount:	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Statu	

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.

f name unavailable in Flor					· · · · · · · · · · · · · · · · · · ·	06 Jan	
f name unavailable in Flor Californi late or country under the la	ida, enter alternat	e corporate nan	ne adopted for t 3.	he purpose of tr <i>01- 081</i>	ansacting b	usiness in Florida	
ate or country under the la	w of which it is i	ncorporated)	-	(FEI number	r, if applica	ble)	
		5	(Duration: Year corp. will cease to exist or "perpetual")				
(Date of incorpor	ration)	`	(Duration:	Year corp. will	cease to ex	ist or "perpetual")	
N/A							
(Si	EE SECTIONS 6	07.1501 & 607.	.1502, F.S., to c	-	y liability)		
3745 W. Cha	Lapman An	e., Suite	200	Orange.	CA	92868	
	(Pri	incipal office ac	ddress)				
3745 W. Cha,	oman Are.	. Suite	200	Orange.	CA	92868	
	(Cu	rrent mailing ac	idress)				
Residential (Purpose(s) of corpora	Mortgage	Broker					
(Purpose(s) of corpora	tion authorized in	n home state or	country to be c	arried out in stat	e of Florida	<u>a)</u>	
ame and street address of	of Florida registe	ered agent: (P.	.O. Box <u>NO</u> I	_acceptable)			
Name: B	usiness Fi	lings Inc	orporated	- ,		-	
· -	12 /	nors Saus	re Blud,	Surte 101		,	
e Address: /2	03 Govern	· · · · · · · · · · · · · · · · · · ·			*		

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.

> PRICIO DE BOMENO-1356 Securitary for Business Filing's Incorporal Registered agent's signature) (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 business addresses of officers and/or directors:

DIRECT		_			
	Brian				
ddress:	16217	Alpine Place	, La Mirada,	CA	90638
ce Chairma	m: David	1 Thomas			
Idress:	900	Liard Place,	Costa Mesa	CA	92626
· · · · · · · · · · · · · · · · · · ·	Brean				
dress:	16217	Alpine Place,	, La Mirada ,	CA	90638
rectoru	David .	Thomas			
dress:	900 Lia	ord Place	Costa Mesa	CA	92626
	Brian				
ldress:	16217	Alpine Place	. La Mirada	CA	90638
ce Presider	t: Bran	Fox			
dress:	16217	Alpin Place	La Mirada	CA	90638
cretary:	Brian	Fex			
ldress:		_	La Mirada	CA	90631
easurer:	Bran	Fex	La Mirada	C,A	906 38
ddress:		Alpine Place		•	
	ecessary, you	may attach an adde	ndum to the application lis	ting addition	onal officers and/or directors.
3	(Sig	phature of Director of	or Officer listed in number	12 of the a	pplication)
4		Brian Fo	X ne and capacity of person s		

State of California Secretary of State

SECRETARY OF STATE DIVISION OF CORPORATIONS

06 JAN 17 AM 8: 51

CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, BRUCE McPHERSON, Secretary of State of the State of California, hereby certify:

That on the **24th day of May, 2004, CITY FUNDING GROUP** became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of December 28, 2005.



BRUCE McPHERSON Secretary of State