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(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	<i>;#</i>)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Coples	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only

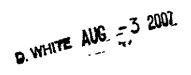


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1001 AUG -3 P 1: 25
SECRETARY OF STATE



COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Barren Leading Inc. (Name of corporation - must include suffix)	
(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:	
Michael Borron (Name of Person)	* ···
Rarren Leading, Toc. (Firm/Company)	,ट ः-
135 Maple St. Ste 200 (Address)	n mail - Physic
(City/State and Zip code)	u bake in
For further information concerning this matter, please call:	
Michael Barron at (678) 928-403((Name of Person) (Area Code & Daytime Telephone Number)	*
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$\sum_\$78.75 Filing Fee & \$\sum_\$\$78.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy	



July 17, 2007

MICHAEL BARRON 135 MAPLE ST STE 200 GAINESVILLE, GA 30501

SUBJECT: BARRON FINANCIAL, INC.

Ref. Number: W07000034066

We have received your document for BARRON FINANCIAL, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6933.

Letter Number: 107A00045141

Dale White Document Specialist

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.

Barren Lending, Inc. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"		
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")		
Barron Financial, Fac. (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)		
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)		
Georgia 3N/A		
(State or country under the law of which it is incorporated) (FEI number, if applicable)		
(Date of incorporation) 5. For ever (Duration: Year corp. will cease to exist or "perpetual")		
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")		
6. Never have transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)		
135 Maple St. Ste 200 Caicesville (A 3050) (Principal office address)		
135 Maple St. Ste 200 Gainersville GA 30501		
(Current manning address)		
(Current mailing address) Mortgage Broker Susiness (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)		
Name and street address of Florida registered agent: (P.O. Box NOT acceptable)		
Name: RAshley - SEE 22		
ffice Address: 995 SANTA ROBA BLVD UNIT 504		
(City) (Zip code)		
). Registered agent's acceptance: aving been named as registered agent and to accept service of process for the above stated corporation at the place esignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I enther 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.		

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.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors:

A. DIRECTORS Chairman: Michael Barran	FILED
Address: 135 maple st ste 200	
Coursville CA 3U501	SECRETARY OF STATE
Vice Chairman:	TĂLLAHASSEE. FLORIDA
Address:	<u>an energia de la companio esta en la companio de la companio del companio del companio de la companio del companio de la companio del companio de la companio del companio de la companio de la companio del compa</u>
	and the second s
Director:	
Ginesille GA 30501	
Vice President:	Hamai and the same
Address:	رُون ۾ <u>انهيائي ۾ ان جي ان جي </u>
Secretary:	the second secon
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the app	
13.	
(Signature of Director or Officer listed) 14. Michael Barran CEO Presider (Typed or printed name and capacity)	4

Control No. 0680586

STATE OF GEORGIA FILED

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

2007 AUG -3 P 1: 25

SECRETARY OF STATE

CERTIFICATE OF **EXISTENCE**

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

BARRON LENDING, INC.

Domestic Profit Corporation

was formed or was authorized to transact business on 09/25/2006 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 2nd day of August, 2007

> Karen C Handel Secretary of State

Faun CHandll

Certification Number: 1561091-1 Reference:

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp