# FOS 0000 06208

| (Requestor's Name)                      |  |  |  |  |
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| (Address)                               |  |  |  |  |
| (Address)                               |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |
| (Document Number)                       |  |  |  |  |
| ,                                       |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |
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| 789, 623,671                            |  |  |  |  |

Office Use Only

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SECRETARY OF STATE

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105-W208



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 20, 2005

CHRISTOPHER M MASON 15350 SW SEQUOIA PARKWAY STE 150 PORTLAND, OR 97224

SUBJECT: EDGEWATER LENDING GROUP INC.

Ref. Number: W05000048029

We have received your document for EDGEWATER LENDING GROUP INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 505A00063943

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

# **COVER LETTER**

| TO: Registration Section Division of Corporations   |   |
|---|---|
| SUBJECT: Edgewater Lending Gro  | oup Inc.  |
|   | orporation - must include suffix)   |
| Dear Sir or Madam:  |   |
|   | ation for Authorization to Transact Business in Florida," itted to register the above referenced foreign corporation to |
| Please return all correspondence concerning th  | is matter to the following:   |
| Christopher M Mason   |   |
|   | Name of Person)   |
| Edgewater Lending Group Inc.  |   |
| (   | Firm/Company)   |
| 15350 SW Sequoia Parkway, S   | Suite # 150   |
|   | (Address)   |
| Portland, OR 97224  |   |
| (Ci   | ty/State and Zip code)  |
| For further information concerning this matter,   | please call:  |
| Chris Mason at (  | 503 624-4567 全量 日   |
| (Name of Person)  | (Area Code & Daytime Telephone Number)  |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314                      |
| Enclosed is a check for the following amount:   |   |
| ☐ \$70.00 Filing Fee  |   |

## 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.

| Edgewater Lending Group Inc.   |                                   |                      |  |   |
|--|-----------------------------------|----------------------|--|---|
| (Enter name of corporation; must include "INCORP "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") | RATED," "C                        | OMPAN                | Y," "CORPORATION,"                               |   |
|  |                                   |                      |  | * · · · · · · · · · · · · · · · · · · · |
| (If name unavailable in Florida, enter alternate corpo   | date name adop                    | ted for th           | purpose of transacting but                       | siness in Fjorida)                      |
| Oregon   | ∭ 3. No                           | ne                   |  |   |
| (State or country under the law of which it is incorpo   | matecl)                           |                      | (FEI number, if applicable                       | c)                                      |
| 08/02/2004   | 5, Pe                             | rpet⊔a               | 1  |   |
| (Date of incorporation)  | (Du                               | ration: 1            | ear corp. will cease to exis                     | t or "perpetual")                       |
| None   | _                                 |                      |  |   |
| (Date first transacted (SEE SECTIONS 607.150   | business in Flor<br>& 607.1502, F | ida if p<br>.S. to d | for to registration)  Termine penalty liability) |   |
| 15350 SW Sequoia Parkway, S  | ite # 150,                        | Port                 | and, OR 97224                                    |   |
| (Principal   | office address)                   | ]. ]                 |  |   |
| 15350 SW Sequoia Parkway,  | Suite # 15                        | O Pc                 | ortland, OR 9722                                 | 24                                      |
| (Current   | ailing address)                   |                      |  |   |
| Mortgage Lending   |                                   |                      |  |   |
| (Purpose(s) of corporation authorized in hom   | state or country                  | to be ca             | rried out in state of Florida)                   | Zili<br>ALI                             |
| Name and street address of Florida registered a  | ent: (P.O. Bo:                    | X NOT                | acceptable)                                      | ZGJJ OCT<br>SECRET                      |
| Name: NRAI Services, Inc.  |                                   |                      | ••   | T 18                                    |
| fice Address: 2731 Executive Par   | k Drive, #                        | 4                    | *  | E P                                     |
| Weston   |                                   | , Florid             | 33331  | - 65 S                                  |
| (City)   |                                   |                      | (Zip code)                                       | <b>5</b> 4 5                            |
| Registered agent's acceptance:   | aant seuvice as                   |                      | South a shown state !                            | #                                       |

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.

| See attache       |            |  |
|-------------------|------------|--|
| (Registered agent | signature) |  |

<sup>11.</sup> 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 paving custody of corporate records in the jurisdiction under the law of which it is incorporated.

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



# NATIONAL REGISTERED AGENTS, INC

... "NRAI, the best choice for statutory representation"

October 12, 2005

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE: EDGEWATER LENDING GROUP INC.

This letter is to confirm that NRAI Services, Inc., located at 2731 Executive Park Drive, Suite 4, Weston, FL 33331, has consented to act as the registered agent for service of process, in the State of Florida, for the above referenced entity.

Having been named as the registered agent and to accept service of process for the above stated corporation at the place designated in this letter and the Application for Authorization to Transact Business in Florida, I hereby accept the appointment accept the appointment accept the 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.

Respectfully,

NRAI Services, Inc.

Loretta A McCool Assistant Secretary

| A. DIRECTORS  |   |
|---|---|
| Chairman: None  |   |
| Address:  |   |
|   |   |
| Vice Chairman: None   |   |
| Address:  |   |
|   |   |
| Director: None  |   |
| Address:  |   |
|   |   |
| Director: None  |   |
| Address:  |   |
|   |   |
| B. OFFICERS   |   |
| President: Paula R. Brotherton                                    |   |
| Address: 15350 SW Sequoia Parkway, Suite #                        | 150, Portland, OR 97224   |
|   | ALEG 0  |
| Vice President: None  | ARE TA  |
| Address:  | 88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>88.50<br>89.50<br>86<br>86<br>86<br>86<br>86<br>86<br>86<br>86<br>86<br>86<br>86<br>86<br>86 |
|   | PS P  |
| Secretary: Paula R. Brotherton                                    |   |
| Address: 15350 SW Sequoia Parkway, Suite #                        | 150, Portland, OR 97224   |
| Treasurer: Christopher M Mason                                    |   |
| Address: 15350 SW Sequoia Parkway, Suite                          | # 150, Portland, OR 97224   |
|   |   |
| NOTE: If necessary, you may attach an addendam to the application | n listing additional officers and/or directors.   |
| 13. (Signature of Director or Officer listed in num               | ober 12 of the application)   |
| Paula R. Brotherton   | ,   |
| (Typed or printed name and capacity of per                        | son signing application)  |

#### **CERTIFICATE**

# State of Oregon

OFFICE OF THE SECRETARY OF STATE Corporation Division

Section 1995

I, BILL BRADBURY, Secretary of State of Oregon, and Custodian of the Seal of said State, do hereby certify:

### EDGEWATER LENDING GROUP INC.

142018

incorporated under the Oregon

Business Corporation Act

on

August 2, 2004

and is active on the records of the Corporation Division as of the date of this certificate.



In Testimony Whereof, I have hereunto set my hand and affixed hereto the Seal of the State of Oregon.

BILL BRADBURY, Secretary of State

 $By \perp \int$ 

Debra L. Virag

October 17, 2005