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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corpora	tions		
SUBJECT: 5 Arch F			
SUBJECT:		on - must include suffix	
Dear Sir or Madam:			
The enclosed "Application & "Certificate of Existence," of above referenced foreign co	r "Certificate of Good S	tanding" and check are sub	
Please return all corresponde Gene Clark	ence concerning this man	tter to the following:	•
	Name	of Person	
5 Arch Funding	Corp.		
	Firm/C	ompany	
1920 Main Stree	t, Suite 210		
	Ad	dress	
Irvine, CA 92614			
	City/State	e and Zip code	
gclark@5archgrou	ıp.com		
E	-mail address: (to be use	ed for future annual report r	notification)
For further information cond	cerning this matter, pleas	se call:	
Gene Clark	a. 949	, 387-8092	
Name of Person		ea Code & Daytime Teleph	one Number
STREET/COURIE New Filing Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 32 Enclosed is a check for the	itions ater Circle 301	MAILING A New Filing Se Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7
	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certificate of Status &

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.

_{1.} 5 Arch Fu	nding Corp.		
(Enter name of con	rporation; must include "TNCORPORATED, rp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATION,"	•
2.01, 001, 00.	,p, 2.4, 66, 6. 64.p. /		
		adopted for the purpose of transacting business in Florida)	
2. California		46-16007493	
•	nder the law of which it is incorporated)	(FEI number, if applicable)	
4. 11/06/201		perpetual	-
(Date o	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	1.613 1.413 1.414
6.			
		in Florida, if prior to registration) 502, F.S., to determine penalty liability)	OLIVATION OF O
₇ 1920 Main	Street, Suite 210, Irvine	CA 92614	14 APR -8
<u> </u>	(Principal office add	dress)	- <i>c</i> o
1920 Main	Street, Suite 210, Irvine C	A 92614	Ξ
	(Current mailing add	dress)	F.4 9: 4.1
Peal Esta	te Investment and Lendir	and	
	te Investment and Lendir of corporation authorized in home state or co		-
. , , , ,			
9. Name and street	address of Florida registered agent: (P.	, ,	
Name:	Corporation Service Comp	eany	
Office Address:	1201 Hays Street		
	Tallahassee	, Florida 32301	
	(City)	(Zip code)	
10. Registered ago		vice of process for the above stated corporation at the	place
designated in this d	application, I hereby accept the appoint	tment as registered agent and agree to act in this cape relative to the proper and complete performance of t	acity. I
	imply wate the provisions of this statues imiliar with and accept the obligations		ny
,	Swell		
	(Registered agent's s	signature)	
11. Attached is a c	ertificate of existence duly authenticated	d, not more than 90 days prior to delivery of this applic	cation 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:
A. DIRECTORS
Chairman:
Address:
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: Gene Clark
Address: 1920 Main Street, Suite 210, Irvine CA 92614
Vice President: Timothy Gannaway
Address: 1920 Main Street, Suite 210, Irvine CA 92614
Addition
Secretary: Timothy Gannaway
Address: 1920 Main Street, Suite 210, Irvine CA 92614
Treasurer: N/A
Address:
NOTE: If necessary, you may attach an addeparts to the application listing additional officers and/or directors.
$\mathcal{L}(\mathcal{Y}(n))$
Signature of Director or Officer
The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes
a third degree felony as provided for in s.817.155, F.S.
are true and that he or she is aware that false information submitted in a document to the Department of State constitutes

Addendum to Application by Foreign Corporation for Authorization to Transact Business in Florida

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

Officer: Shawn Miller

Address: 1920 Main Street, Suite 210, Irvine CA 92614

Officer: Steven Davis

Address: 1920 Main Street, Suite 210, Irvine CA 92614

State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

5 ARCH FUNDING CORP.

FILE NUMBER:

C3519317

FORMATION DATE:

11/06/2012

TVPE.

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of February 19, 2014.

DEBRA BOWEN Secretary of State