F00000000 856

To:

Dear Sir or Madam:

to transact business in Florida.

Qualification/Tax Lien Section Division of Corporations

TRANSMITTAL LETTER

MONEYLINE LENDING COMPANY, INC.
(Name of corporation - must include suffix)

800003121638

-02/02/00--01109--003 -*****70.00 *****70.00

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

Please return all correspondence concerning this matter to the following:

MONEY HNE LEW (Firm/Con 23591 EL TORO (Addr LAKE FOREST, C) (City/Sta	RD #365 SECRETARY OF ST ALLAHASSEE, FLO ste/Zip) FILED
(Name of Person) at (949) (Name of Person) Name STREET ADDRESS:	Code & Daytime Telephone Number) MAILING ADDRESS:
Availability Qualification/Tax L en Section Document Division of Corporations Examiner 409 E. Gaines St. Tallahassee, FE 32899 Updater Enclosed is a check for the following amount:	Qualification/Tax Lien Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Acknowledgement poor	\$78.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certified Copy Certified Copy Codak first trans lous S56 3 of c. must sign



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

February 8, 2000

COLLEEN PERRY MONEYLLINE LENDING CO., INC. 23591 EL TORO RD., #265 LAKE FOREST, CA 92630

SUBJECT: MONEYLINE LEADING COMPANY, INC.

Ref. Number: W0000003419

We have received your document for MONEYLINE LEADING COMPANY, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report/uniform business report fees due this office.)

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

A certificate of existence, 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.

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) 487-6913.

Diane Cushing Corporate Specialist

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

Letter Number: 300A00006362

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.

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(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)	-	
2. <u>CALIFORNIA</u> (State or country under the law of which it is incorporated) 3. <u>33-0822649</u> (FEI number, if applicable) 4. <u>3/13/98</u> (Date of incorporation) 5. <u>PERPET UAL</u> (Duration: Year corp. will cease to exist or "perpetual")	-	
6. UPON QUAL, F. CATION (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	-	
7. <u>23591 EL TORO RD. #265</u> <u>LAKE FOREST, CA. 92630</u> (Current mailing address)	, oo Fe	<u></u>
8. MORTGAGE (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida (P.O. Boy or Mail Drop Boy NOT acceptable)	EB 15 PM	TILEU
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: CT CORP. Systems Office Address: 1200 S. Pine Island P.B.	3: 43	
PLANTATION, Florida, 33324 (Zip code)		
10. Registered agent's acceptance:		

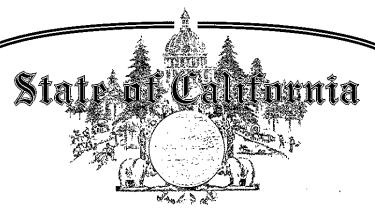
11-11-11-1

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.

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 addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

Chairman:	<u> </u>			
_				
Vice Chair	man:			
Address: _				
_				
Director:				
Address: _				_
_				
Director:				_
Address:		<u></u>		
	CERS (Street address only - P.O. Box NOT acceptable)	SECF	90 F	
	EVAN GENTRY	- ARTA	- E	
	16 SONGBIRD	- SR E O	<u>က</u>	ŗ
	TRABUCO CYN., CA. 92679		P <u>F</u> ပမ	
Vice Presi	denty TAYLOR WOODS 112 CALLE BELLA LOMA		ယ်	
~ /	SAN CLEMENTE, CA. 92673 BRADLEY BARBER			
	24962 VIA PORTOLA			
	LAGUNA NIGUEL CA. 92677			
Addioss.				
NOTE.	If necessary you may attach an addendum to the application listing additional officers and/or directors.			
13				
2)	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)			
14	BRADLEY BARBER, VICE PRES. SECY (Typed or printed name and capacity of person signing application)			, - , -



SECRETARY OF STATE

CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, BILL JUIVES, Sec.	retary of State of the State of	Caulomia, nereby certily:				
	13th	March	98			
That on the	day of		,19,			
MACHIEVALINIE I ENIDANO COMBANIVA INIC						

MONEYLINE LENDING COMPANY, INC.

became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That no record exists in this office of a certificate of dissolution of said corporation nor of a court order declaring dissolution thereof, nor of a merger or consolidation terminated its existence; 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

February 1, 2000

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Secretary of State