

# F00000006351

Document Number Only

CT Corporation System  
660 East Jefferson Street  
Tallahassee, FL 32301  
850-222-1092

DATE: 11/14

200003463052--3  
-11/14/00--01056--017  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Corporation(s) Name

Portfolio Financial Servicing Company

☒ Profit  
☐ Nonprofit

☐ Amendment

☐ Merger

200003463052--3  
-11/14/00--01056--018  
\*\*\*\*\*17.50 \*\*\*\*\*17.50

☒ Foreign  
☐ LLC

☐ Dissolution  
☐ Withdrawal

☐ Mark

☐ Limited Partnership  
☐ Reinstatement  
☐ UCC ☐ 1 or ☐ 3

☐ UBR  
☐ Fictitious Name

☐ Other  
☐ Ch. RA

\*\*\*Special Instructions\*\*

☒ Certified Copy

☐ Photocopies

☒ CUS

☐ Arts/ameds/mergers ☐ Other-See Above

☒ Walk in

☒ Pick-up

☐ Will Wait

Please Return Filed Stamped  
Copies To:

Carol Clark

Thank You!

*mc*  
*11/14*

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Portfolio Financial Servicing Company  
(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:

Su K. Suh

(Name of Person)

Black Helterline LLP

(Firm/Company)

707 S.W. Washington, Suite 1200

(Address)

Portland, OR 97205-3529

(City/State and Zip code)

For further information concerning this matter, please call:

Su K. Suh

(Name of Person)

at ( 503 ) 224-5560

(Area Code & Daytime Telephone Number)

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**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      ☐ \$78.75 Filing Fee & Certificate of Status      ☐ \$78.75 Filing Fee & Certified Copy      ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**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. Portfolio Financial Servicing Company

(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. Delaware

(State or country under the law of which it is incorporated)

3. pending

(FEI number, if applicable)

4. 11/1/00

(Date of incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. upon qualification

(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 2121 S.W. Broadway, Suite 200, Portland, OR 97201

(Principal office address)

2121 S.W. Broadway, Suite 200, Portland, OR 97201

(Current mailing address)

8. Employment and/or contracting with independent contractors who are residents of  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) Florida

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation

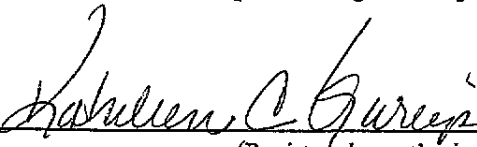
(City)

33324

(Zip code)

10. Registered agent's acceptance:

*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.*

  
(Registered agent's signature)  
Kathleen Gariepy, Asst. Secy.

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:

A. DIRECTORS

Chairman: Jerry T. Hudspeth

Address: 2121 S.W. Broadway, Suite 200  
Portland, OR 97201

Vice Chairman:

Address:

Director: Jerry T. Hudspeth

Address: 2121 S.W. Broadway, Suite 200  
Portland, OR 97201

Director:

Address:

FILED  
NOV 14 PM 3:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. OFFICERS

President: Jerry T. Hudspeth

Address: 2121 S.W. Broadway, Suite 200  
Portland, OR 97201

Vice President:

Address:

Secretary: Jerry T. Hudspeth

Address: 2121 S.W. Broadway, Suite 200

Treasurer: Portland, OR 97201

Address:

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14.

Jerry T. Hudspeth, President

(Typed or printed name and capacity of person signing application)

State of Delaware  
Office of the Secretary of State

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PORTFOLIO FINANCIAL SERVICING COMPANY" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINTH DAY OF NOVEMBER, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

FILED  
NOV 14 PM 3:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



  
Edward J. Freel, Secretary of State

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AUTHENTICATION: 0784017

DATE: 11-09-00