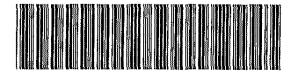
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SECTION OF SME.

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F04-1284

TRANSMITTAL LETTER

TO: Registration Division of	n Section Corporations
SUBJECT: Anod	yne Lending, Inc.
	(Name of corporation - must include suffix)
Dear Sir or Madam	
	lication by Foreign Corporation for Authorization to Transact Business in Florida", tence", and check are submitted to register the above referenced foreign corporation to Florida.
Please return all con	respondence concerning this matter to the following:
Don Bigelow	
	(Name of Person)
Anodyne Lending, I	na.
	(Firm/Company)
2101 East Fourth S	treet, Suite A-112
	(Address)
Santa Ana, CA 927	['] 05
	(City/State and Zip code)
For further informa	tion concerning this matter, please call:
	74 PAR 32
Don Bigelow	Person) at (714) 479-1676
(Name of	Person) (Area Code & Daytime Telephone Number)
	11 L
STREET ADDRE Registration Sectio Division of Corpor 409 E. Gaines St. Tallahassee, FL 32	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327
Enclosed is a check	for the following amount:
☐ \$70.00 Filing Fo	ce

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.	Anodyne Lending, Inc.	
	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	
	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	
2.	California 3. 33-0933910 (State or country under the law of which it is incorporated) (FEI number, if applicable)	.,
	(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4.	October 17, 2000 5. Perpetual (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	. 20-
	(Date of incorporation) (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.")	
	(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.	2101 East Fourth Street, Suite A-112, Santa Ana, CA 92705 (Principal office address)	
	2101 East Fourth Street, Suite A-112, Santa Ana, CA 92705 (Current mailing address)	-1-
	(Current maining address)	
O	Mortgage broker	
٥,		•
٥	(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 or Mail Drop Box NOT acceptable)	
у,	Name and street address of Florida registered agent. (r.O. box of Main Diop box to r acceptance)	
	Name: Corporation Service Company	
o	office Address: 1201 Hay 5 Street	3
	101101001000 3000 PA 12	
	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	
	 Registered agent's acceptance: Iaving been named as registered agent and to accept service of process for the above stated corporation at the pla 	ica
	esignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacit	
fu	urther agree to comply with the provisions of all statutes relative to the proper and complete performance of my o	luties
aı	nd I am familiar with and accept the obligations of my position as registered agent.	
	Thul Mallins (Instant Levetar	
	(Registered agent's signature)	

- 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. DIK	ECTORS /			
Chairman	Y			
Address:				
Vice Cha	imán:			
			,	
• ,			·····	
Director:	Ocn Bigelow	 		
Address:	2101 East Fourth Street, Suite A-112			
	Senta Ana, CA 92705			
Director:				
Address:			***	
			·	
B. OFF	ICERS			
President	Don Bigelow			-
Address:	2101 East Fourth Street, Suite A-112			
	Santa Ana, CA 92705			
Vice Pres	ident:			
		≥ Ω	04	
	,	29	833	~~~~ .
Secretary	-	- SSE	25.2	Ė
Address:		_ <u> </u>	7	U
Treasurer			5 5	
Address:		<u> </u>		···
NOTE.	To separate the second	1/ "		
. Z	If necessary, you may attach an addendam to the application listing additional officers a	hd/or directo	de.	
13.	(Signature of Director or Officer listed in number 12 of the application)		***	
14. Doi	n Bigelow, President			

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



SECRETARY OF STATE

CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, KEVIN SHELLEY, Secretary of State of the State of California, hereby certify:

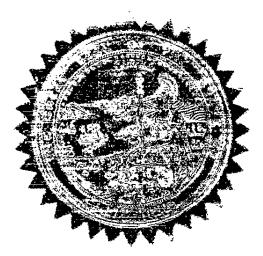
That on the 17th day of October, 2000, ANODYNE LENDING INC. became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

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 which 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 January 14, 2004.

KEVIN SHELLEYSecretary of State