

FD4000003090

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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04 JUN -2 PM 3:48  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

Mary-Ruth Orlando

ADVISED BY PHONE TO

URGENT #1 (d/b/a + suffix)

DATE 6/2

FILED *lit*

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MAXIMUM MORTGAGE INC.  
(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:

MARY-RUTH ORLAND  
(Name of Person)  
MAXIMUM MORTGAGE d/b/a US QuickLoan  
(Firm/Company)  
5554 S. PRINCE ST. # 200  
(Address)  
LITTLETON, CO 80120  
(City/State and Zip code)

For further information concerning this matter, please call:

MARY-RUTH ORLAND at ( 303 ) 933-3333  
(Name of Person) (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

W04-15991

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**

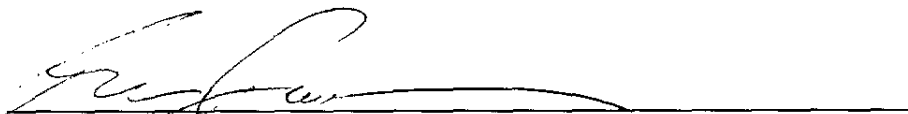
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

- ✓ 1. MAXIMUM MORTGAGE, INC.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- US Quickloan Inc.  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
- ✓ 2. COLORADO 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 10/98 5. PERPETUAL  
(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."  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.))
7. 5554 S. PRINCE ST, #200 HITTETON, CO 80130  
(Principal office address)
- SAME  
(Current mailing address)
8. RESIDENTIAL MORTGAGE BROKER AND CORRESPONDENT  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)
- Name: Josh Janikowski
- Office Address: 3019 Spina St.  
Sarasota FL., Florida 34231  
(City) (Zip code)

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DIVISION OF CORPORATIONS  
04 JUN -2 PM 3:48

**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)

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:

From: THANKS FOR YOUR BUSINESS

303 933 1515

04/27/2004 13:02 #034 P.003/003

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: JEFFREY M HARRIS

Address: 11445 W. BOWLES PL LITTLETON, CO 80127

Vice President: WENDY FETT-REED

Address: \*

12137 W COOPER DR LITTLETON CO 80127

Secretary: JEFFREY M HARRIS

Address: SEE ABOVE

Treasurer: WENDY FETT-REED

Address: SEE ABOVE

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

13. 

(Signature of Director or Officer listed in number 12 of the application)

14. JEFFREY M HARRIS

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



# STATE OF COLORADO

## DEPARTMENT OF STATE CERTIFICATE

I, DONETTA DAVIDSON, Secretary of State of the State of Colorado,  
hereby certify that, according to the records of this office,

MAXIMUM MORTGAGE, INC.  
(Colorado CORPORATION )  
File # 20031323748

was filed in this office on October 14, 2003 and has complied with the applicable provisions  
of the laws of the State of Colorado and on this date is in good standing and authorized and  
competent to transact business or to conduct its affairs within this state.

Dated: April 19, 2004

**For Validation:**

Certificate ID: 788666

To validate this certificate, visit the following  
web site, enter this certificate ID, then follow the  
instructions displayed.

[www.sos.state.co.us/ValidateCertificate](http://www.sos.state.co.us/ValidateCertificate)

SECRETARY OF STATE