

FD4000006225

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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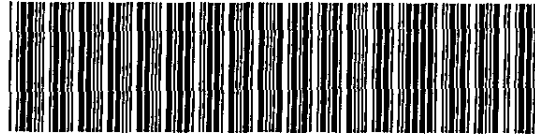
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FD-400 (Rev. 10-10-90) **70.00

FILED
JAN 10 2007
TALLAHASSEE, FLORIDA

FD4-6225
OK

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lending 1st mortgage Corporation
(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:

CAMILLE VAN VIET
(Name of Person)
AMERICAN HOME EQUITY
(Firm/Company)
167 TECHNOLOGY
(Address)
IRVINE CA 92618
(City/State and Zip code)

For further information concerning this matter, please call:

LORIE CAMILLE at (949) 608-3825
(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

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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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. Lending 1st Mortgage Corporation

(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

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

3. 52-2352396

(FEI number, if applicable)

4. 12-11-2001

(Date of incorporation)

5. perpetual

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

6. Business not transacted. Will transact business upon approval.

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 15 Coastal Oak Lane, Coto De Caza, CA 92679

(Principal office address)

15 Coastal Oak Lane, Coto De Caza, CA 92679

(Current mailing address)

8. Mortgage Lending

(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 NOT acceptable)

Name: NRAI Services, Inc.

Office Address: 526 E. Park Avenue

Tallahassee

(City)

, Florida

(Zip code)

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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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.

Christy McClellough, Assistant Secretary
(Registered agent's signature) For NRAI Services, Inc.

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: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Clark Johnson

Address: 15 Coastal Oak Lane, Coto De Caza, CA 92679

Director: Chris Lombardi

Address: 15 Coastal Oak Lane, Coto De Caza, CA 92679

B. OFFICERS

President: Chris Lombardi

Address: 15 Coastal Oak Lane, Coto De Caza, CA 92679

Vice President: _____

Address: _____

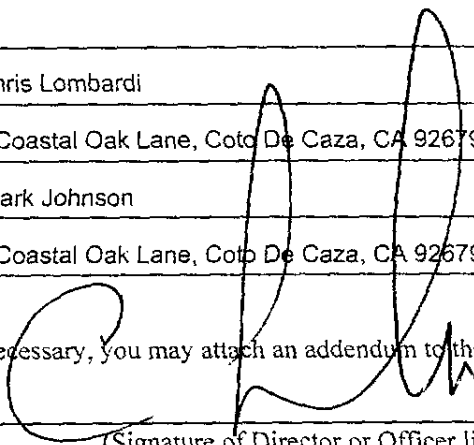
Secretary: Chris Lombardi

Address: 15 Coastal Oak Lane, Coto De Caza, CA 92679

Treasurer: Clark Johnson

Address: 15 Coastal Oak Lane, Coto De Caza, CA 92679

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. Chris Lombardi CEO/Secretary _____
(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE

State of California

SECRETARY OF STATE

CERTIFICATE OF STATUS DOMESTIC CORPORATION

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

That on the **11th day of December, 2001**, **LENDING 1ST MORTGAGE** became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; 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 October 14, 2004.



Kevin Shelley
KEVIN SHELLEY
Secretary of State

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