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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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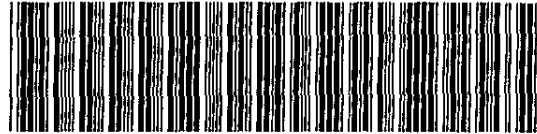
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FD 5-116
OK

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cheetah Settlement Services, 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:

Allen Ringer
(Name of Person)

Cheetah Settlement Service, Inc.
(Firm/Company)

P.O. Box 1769
(Address)

Mead, WA 99021
(City/State and Zip code)

For further information concerning this matter, please call:

Allen Ringer at (509) 232-2902
(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

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

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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. Cheetah Settlement Services, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Washington State

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

3. _____

(FEI number, if applicable)

4. June 26, 2002

(Date of incorporation)

5. Perpetual

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

6. _____

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 12420 North Ruby Road, Spokane, WA 99218

(Principal office address)

P.O. Box 1769, Mead, WA 99021

(Current mailing address)

8. Closing Mortgage Loans

(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: Battina Mangano

Office Address: 21682 Little Bear Lane

Boca Raton, Florida 33428

(City)

(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)

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:

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SECRETARY OF STATE

A. DIRECTORS

Chairman: J. Craig Barille

Address: East 23 Crawford
Deer Park, WA 99006

Vice Chairman: _____

Address: _____

Director: Franklin B. Taylor

Address: 35915 Highway 395 North
Deer Park, WA 99006

Director: _____

Address: _____

B. OFFICERS

President: Franklin B. Taylor

Address: 35915 Highway 395 North
Deer Park, WA 99006

Vice President: _____

Address: _____

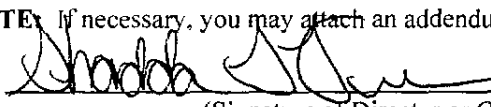
Secretary: Shadda Lee

Address: 12420 North Ruby Road, Spokane, WA 99218

Treasurer: _____

Address: _____

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. Shadda Lee (Secretary)
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

UNITED STATES OF AMERICA

The State of Washington



Secretary of State

I, SAM REED, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE/AUTHORIZATION

OF

CHEETAH SETTLEMENT SERVICES INC.

I FURTHER CERTIFY that the records on file in this office show that the above named Profit Corporation was formed under the laws of the State of WA and was issued a Certificate Of Incorporation in Washington on 6/26/2002.

I FURTHER CERTIFY that as of the date of this certificate, CHEETAH SETTLEMENT SERVICES INC. remains active and has complied with the filing requirements of this office.

Date: December 9, 2004

UBI: 602-215-332

Given under my hand and the Seal of the State
of Washington at Olympia, the State Capital

Sam Reed, Secretary of State