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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Trish Syltanis gave Puthorization by Phone to Correct Add Sucrix on Alter. Name Date 3/28/04 DOC. EXAM TH.

Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: NL 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:
Trish Sultanis
(Name of Person)
NL Inc.
(Firm/Company)
3201 Danville Blud#195
Alamo, Ca 94507
(City/State and Zip code)
For further information concerning this matter, please call:
TRISH Sultanis at (925) 552-3576 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$\sum \text{\$78.75 Filing Fee & \$78.75 Filing Fee & \$87.50 Filing Fee,} \\ \text{Certificate of Status} \text{Certified Copy} \text{Certified Copy} \text{Certified Copy}



National Registered Agents, Inc.

... "NRAI, the best choice for statutory representation"

March 15, 2006

Secretary of State Florida New Filing Section P.O. Box 6327 Tallahassee, FL 32314

> NL, Inc. Florida Certificate of Authority

Dear Sir/Madam,

For the purposes of filing the above captioned Certificate if Authority, enclosed, in duplicate, is an Application for Certificate of Authority, accompanied by a check in the amount of \$78.75

Please proceed with the filing of the enclosed returning official receipts and evidence to the principal address.

Thank you in advance for your cooperation in this matter.

Very truly yours,

Juanita Mahoney NRAI

Enclosures - Check

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. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp." "Inc," "Co," or "Corp.") Residential Pacific Mortsage Inc (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (State or country under the law of which it is incorporated) (FEI number, if applicable) 6-18-1991 (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Current mailing address) (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: 1 ExecutivE Park drive Suite4 Office Address: 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:
A. DIRECTORS
Chairman: Rob HIRT
Address: 3201 Danville Blud # 195
_Hamo Ca 94507
Vice Chairman: TRACLY HIRT
Address: 3201 DANVILLE Blud #195
Director:
Address:
Director:
Address:
TAEGO
B. OFFICERS
President Rob High
Address: 3201 Danville Blud #195
Alamo, Ca 94507
Diee President: TRacey Hiet
Address: 3201 Danville Blud #195
Alamo Ca 94507
Secretary:
Address:
Treasurer:
Address:
NOME IS
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
(Signature of Director or Officer listed in number 12 of the application)
14. ROB HIRA CEO
(Typed or printed name and capacity of person signing application)

State of California Secretary of State

CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, BRUCE McPHERSON, Secretary of State of the State of California, hereby certify:

That on the **18th day of June**, **1991**, **NL INC**. 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 February 23, 2006.



BRUCE McPHERSON Secretary of State