

FD6000007401

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

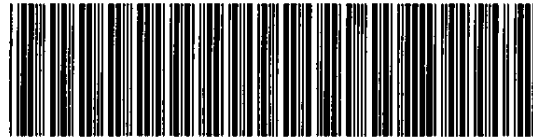
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400081890254

11/28/06--01060--001 **70.00

FILED

2006 NOV 29 PM 2:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch NOV 29 2006

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: LENDING UNIVERSE CORP.

(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:

GALINA ZHIGUN

(Name of Person)

LENDING UNIVERSE CORP.

(Firm/Company)

2729 CONEY ISLAND AVENUE

(Address)

BROOKLYN, NEW YORK 11235

(City/State and Zip code)

For further information concerning this matter, please call:

GALINA ZHIGUN

(Name of Person)

at (718) 332-4100 X1275

(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

☐ \$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 UNIVERSE CORP.**

(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. **NEW YORK**

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

3. **11-3470468**

(FEI number, if applicable)

4. **JANUARY 21, 1999**

(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. **2729 CONEY ISLAND AVENUE, BROOKLYN, N. Y. 11235**

(Principal office address)

2729 CONEY ISLAND AVENUE, BROOKLYN, N. Y. 11235

(Current mailing address)

8. **MORTGAGE BROKER**

(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:

PAVEL MARTYNENKO

Office Address:

221 PORTA ROSA CIRCLE

ST. AUGUSTINE

(City)

32092

(Zip code)

FILED
2006 NOV 29 PM 2:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Pavel Martynenko

(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: GALINA ZHIGUN

Address: 2729 CONEY ISLAND AVENUE
BROOKLYN, NEW YORK 11235

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: GALINA ZHIGUN

Address: 2729 CONEY ISLAND AVENUE
BROOKLYN, NEW YORK 11235

Vice President: _____

Address: _____

Secretary: _____

Address: _____

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. GALINA ZHIGUN

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

FILED
2008 NOV 29 PM 2:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

State of New York
Department of State } ss:

I hereby certify, that the Certificate of Incorporation of LENDING UNIVERSE CORP. was filed on 01/21/1999, under the name of AGA CAPITAL NY INC., with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation. I further certify the following:

A Biennial Statement was filed 05/23/2001.

A Biennial Statement was filed 12/30/2002.

A certificate changing name to LENDING UNIVERSE CORP. was filed on 06/08/2006.

The Biennial Statement is past due.

I further certify, that no other documents have been filed by such Corporation.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 20th day of October
two thousand and six.*

Daniel Shapiro
Special Deputy Secretary of State

FILED
2006 NOV 29 PM 2:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA