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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

VH
~~7007-7472~~
~~1-07-3938~~

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Amwest Capital 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:

Doug Hinton

(Name of Person)

Amwest Capital Mortgage, Inc.

(Firm/Company)

465 E GRAND AVE.

(Address)

Escondido, CA 92025

(City/State and Zip code)

For further information concerning this matter, please call:

Doug Hinton

(Name of Person)

at (760) 743-8922

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 13, 2007

DOUGH HINTON
465 E GRAND AVE
ESCONDIDO, CA 92025

SUBJECT: AMWEST CAPITAL MORTGAGE, INC.
Ref. Number: W07000007472

We have received your document for AMWEST CAPITAL MORTGAGE, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Valerie Herring
Document Specialist
New Filing Section

Letter Number: 207A00010886

**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. **Amwest Capital Mortgage, Inc.**

(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. **30-0341030**

(FEI number, if applicable)

4. **OCTOBER 4, 2005**

(Date of incorporation)

5. **Perpetual**

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

6. **(to be announced)**

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

7. **465 E GRAND AVE., ESCONDIDO, CA 92025**

(Principal office address)

465 E GRAND AVE., ESCONDIDO, CA 92025

(Current mailing address)

8. **Mortgage Loan Origination**

(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: **George James**

Office Address: **8596 ARLINGTON EXPRESSWAY**

JACKSONVILLE

(City)

, Florida **32211**

(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.

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TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

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A. DIRECTORS

Chairman: Glenn F. Hinton

Address: 18155 Traylor Road
Ramona, CA 92065

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Vice Chairman: Lynn M. Hinton

Address: 18155 Traylor Road
Ramona, CA 92065

Director: GLENN F. HINTON

Address: 18155 TRAYLOR RD.
RAMONA, CA 92065

Director: LYNN M. HINTON

Address: 18155 TRAYLOR RD, RAMONA, CA

B. OFFICERS

President: Glenn F. Hinton

Address: 18155 Traylor Road
Ramona, CA 92065

Vice President: None

Address: _____

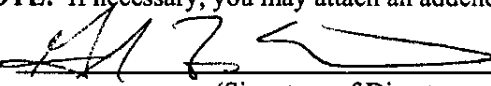
Secretary: Lynn M. Hinton

Address: 18155 TRAYLOR RD, RAMONA, CA

Treasurer: Lynn M. Hinton

Address: 18155 TRAYLOR RD, RAMONA, CA 92065

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

13.  Glenn F. Hinton
(Signature of Director or Officer listed in number 12 of the application)

14. President, Director, Chairman

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

**State of California
Secretary of State**

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TALLAHASSEE, FLORIDA

**CERTIFICATE OF STATUS
DOMESTIC CORPORATION**

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

That on the **4th day of October 2005**, **AMWEST CAPITAL MORTGAGE, 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
January 25, 2007.



Debra Bowen

DEBRA BOWEN
Secretary of State