

FD9 0000000150

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

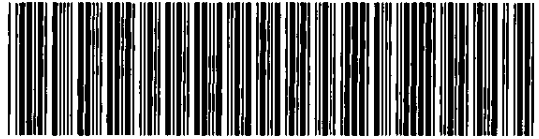
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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01/12/09--01043--008 \*\*87.50

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. McKnight JAN 13 2009

# GreenLight Compliance & Licensing, Inc.

September 22, 2008

## VIA OVERNIGHT DELIVERY

Florida Department of State

~~R. A. Gray Building~~

~~500 S. Bronough~~

~~Tallahassee, FL 32399-0250~~

*2661 Executive Center Circle  
Tallahassee, FL 32301*

Re: Your Mortgage Lender

FL Application for Authorization to transact business in Florida

Dear Sir or Madam,

Please find enclosed:

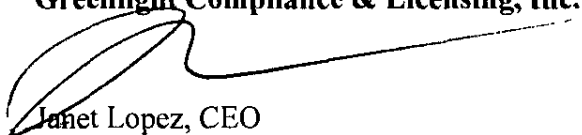
- 1) Above-referenced application      1 Original
- 2) Check made payable to: Florida Department of State; No Credit Cards
- (2a) Fee for Regular processing -      \$ 87.50      ( 5-7 Bus. Days )
- 3) Home state Certificate of Good Standing      Dated within 90 days

If you have any questions, please contact the undersigned.

\*\*\*Please return the filed document to Greenlight Compliance at 1122 E. Lincoln Ave. #108, Orange, CA 92865.\*\*\*

Very truly yours,

**Greenlight Compliance & Licensing, Inc.**

  
Janet Lopez, CEO

v 09-08-2008

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Your Mortgage Lender  
(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:

Janet Lopez  
(Name of Person)

Greenlight Compliance and Licensing, Inc.  
(Firm/Company)

1122 E. Lincoln Avenue, Suite 108  
(Address)

Orange CA 92865  
(City/State and Zip code)

For further information concerning this matter, please call:

Janet Lopez at ( 877 ) 425-4258  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**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

**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. Your Mortgage Lender, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

YML Mortgage, Inc.

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

2. NV 3. 13-4345992  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11/02/2006 5. perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 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. 21800 Oxnard St., Ste. 1195 Woodland Hills CA 91367  
(Principal office address)

21800 Oxnard St., Ste. 1195 Woodland Hills CA 91367  
(Current mailing address)

8. Mortgage Business Activities  
(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: InCorp Services, Inc.

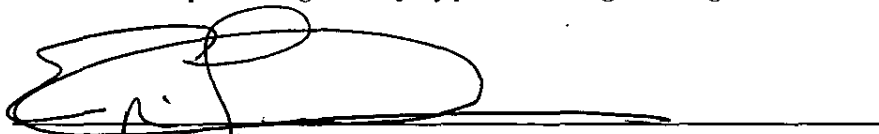
Office Address: 17888 67th Court North

Loxahatchee, Florida 33470  
(City) (Zip code)

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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.*

  
(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: Michael Anthony Coleman

Address: 21800 Oxnard St., Ste. 1195 Woodland Hills CA 91367

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

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TALLAHASSEE, FLORIDA

**B. OFFICERS**

President: Michael Anthony Coleman

Address: 21800 Oxnard St., Ste. 1195 Woodland Hills CA 91367

Vice President: N/A

Address: \_\_\_\_\_

Secretary: Michael Anthony Coleman

Address: 21800 Oxnard St., Ste. 1195 Woodland Hills CA 91367

Treasurer: Michael Anthony Coleman

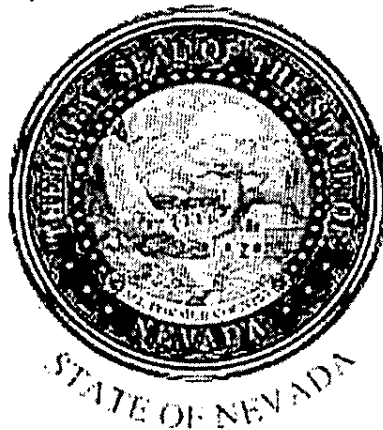
Address: 21800 Oxnard St., Ste. 1195 Woodland Hills CA 91367

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

13. Michael Anthony Coleman  
(Signature of Director or Officer listed in number 12 of the application)

14. Michael Coleman President  
(Typed or printed name and capacity of person signing application)

# SECRETARY OF STATE




## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **YOUR MORTGAGE LENDER**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since November 2, 2006, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on January 6, 2009.



  
ROSS MILLER  
Secretary of State

Electronic Certificate  
Certificate Number: C20090106-2968  
You may verify this electronic certificate  
online at <http://www.nvsos.gov/>

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