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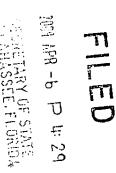
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APR -7 2009

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COVER LETTER

7991 APR -6 P 4: 29

TO: New Filing Section Division of Corporations	LEGRETARY OF STATE FILE AHASSEE, FLORID	
SUBJECT: Golden Heritage Fina	ancial Services Corporation	
	orporation - must include suffix)	
Dear Sir or Madam:		
	ation for Authorization to Transact Business in Florida," itted to register the above referenced foreign corporation to	
Please return all correspondence concerning the	is matter to the following:	
Andreza Talbutt	Ł	
	Name of Person)	
Amtec Funding Group, LLC		
	Firm/Company)	
3330 Harbor Blvd		
•	(Address)	
Costa Mesa, CA 92626		
(Cit	ty/State and Zip code)	
For further information concerning this matter,	please call:	
Andreza Talbutt at (_	714 , 245-5192	
(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 \$78.75 Filing Fee & Certificate of State		

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACTION BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TOP 4: 29 REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

	orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	b, committee, condition,	
(If name unavail	able in Florida, enter alternate corporate nam	ne adopted for the purpose of transacting business in Florida)	
Washingto	on	602-903-338	
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)	
02/26/200	9	_{s.} Perpetual	
(Date	of incorporation)	(Duration: Year corp. will cense to exist or "perpetual")	
Upon App	roval		
		s in Florida, if prior to registration) .1502, F.S., to determine penalty liability)	
12453 Bel	Red Road Suite 250B, Bel	levue, WA 98005	
	(Principal office a		
12453 Bel	Red Road Suite 250B, Bel	levue, WA 98005	
	(Current mailing a	ddress)	
Mortgage	Broker		
(Purpose(s	e) of corporation authorized in home state or	country to be carried out in state of Florida)	
Name and stree	et address of Florida registered agent: (F	P.O. Box NOT acceptable)	
Name:	InCorp Services, Inc.		
ffice Address:	17888 67th Court North		
	Loxahatchee	Florida 33470 (Zip code)	
	(City)	(Zip code)	
aving been nam esignated in this	application, I hereby accept the appoin	rvice of process for the above stated corporation at the plac ntment as registered agent and agree to act in this capacity. s relative to the proper and complete performance of my du	

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.

(Registered agent's signature)

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

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A. DIRE	CTORS	
Chairman:	Samy Khoury	2009 APN -Ь Р 4: 29
		GEORGIARY OF STATE
_		OR LANDAGED FLORIDA
Vice Chair	man;	
Address: _		
– Director:	Samy Khoury	
	12453 Bel Red Road, Bellevue WA 98005	
Director: \	J. Kevin O'Brien	
	12453 Bel Red Road, Bellevue WA 98005	
B. OFFI		· · · · · · · · · · · · · · · · · · ·
	Samy Khoury	
Address: _	12453 Bel Red Road, Bellevue WA 98005	
Vice Presid	_{dent:} J. Kevin O'Brien	
	12453 Bel Red Road, Bellevue WA 98005	
<u>-</u>	J. Kevin O'Brien	
Secretary:	12453 Bel Red Road, Bellevue WA 98005	
	Samy Khoury	
Address:	12453 Bel Red Road, Bellevue WA 98005	
NOTE: 1	f necessary, you may attach an addendure to the application listing add	litional officers and/or directors.
13	Signature of Director or Officer listed in number 12 of the	ne application)
_{14.} Sar	ny Khoury - Director	
	(Typed or printed name and capacity of person signing	application)



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

CERTIFICATE OF EXISTENCE/AUTHORIZATION OF

GOLDEN HERITAGE FINANCIAL SERVICES CORPORATION

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 2/26/2009.

I FURTHER CERTIFY that as of the date of this certificate, GOLDEN HERITAGE FINANCIAL SERVICES CORPORATION remains active and has complied with the filing requirements of this office.

Date: March 27, 2009

UBI: 602-903-338

SEAL OF STANKS

(24.44F)

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

- 27:27

Sam Reed, Secretary of State