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(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	∋#)
PICK-UP	☐ WAIT	MAIL
(Ви	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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TILED

SECRETARY OF STATE

ALAHASSEE FI CASSA

PS 10/19/10

COVER LETTER

	Filing Section ision of Corporations			
SUBJECT	Greenlight Financial Services			
SOBSECT.		orporation	- must include suffix	
Dear Sir or N	Madam:			
"Certificate of	d "Application by Foreign Corpo of Existence," or "Certificate of need foreign corporation to trans	Good Stand	ing" and check are sub	
Please return	all correspondence concerning	this matter	to the following:	
Julie Albinio	ı			
		Name of P	erson	
Greenlight F	inancial Services			
		Firm/Comp	pany	
8105 Irvine (Center Drive Suite 150		***	
		Addres	ss	
Irvine, CA 92	2618			
	C	ity/State an	đ Zip code	
JAlbinio@gr	eenlightloans.com	1.0		
	E-mail address: (to	o be used to	or future annual report n	otification)
For further in	nformation concerning this matte	er, please ca	11:	
Julie Albinio	at	(949	798-2434	
Nan	ne of Person		ode & Daytime Telepho	one Number
New Divis Clift 2661	REET/COURIER ADDRESS: 7 Filing Section sion of Corporations ton Building 1 Executive Center Circle ahassee, FL 32301		MAILING All New Filing Se Division of Co P.O. Box 6327 Tallahassee, F.	ction orporations
Enclosed is a	a check for the following amount	:		
□ \$70.00 Fi	iling Fee \$78.75 Filing Fe Certificate of St		\$78.75 Filing Fee & 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.

(Enter name of	rancial Services, Inc corporation; must include "INCORPORATED Corp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATION,"			-
,					
(If name unavai	lable in Florida, enter alternate corporate name	e adopted for the purpose of transacting busi	ness in F	lorida)	_
2. CA	3	3. 33-0973601			
	under the law of which it is incorporated)	(FEI number, if applicable)			•••
4. 07/17/2001	5	5. Perpetual			
(Date	e of incorporation)	(Duration: Year corp. will cease to exist or "perpetual"		tual")	-
6 W	non filing				
7	(Date first transacted business	in Florida, if prior to registration)			
		502, F.S., to determine penalty liability)		م <u>حت</u>	
7. <u>8105 Irvine Ce</u> i	nter Drive Suite 150, Irvine, CA 92618		2277	0	_
	(Principal office add	dress)	20	8	11
8105 Irvine Ce	nter Drive Suite 150, Irvine, CA 92618		\$ P		_
	(Current mailing ad-	dress)	SEC.	S	Ī
			力い	₽	
	Estate Agents and Brokers		<u> </u>		_
(Purpose(s) of corporation authorized in home state or c	ountry to be carried out in state of Florida)	意言	45	
9. Name and stre	et address of Florida registered agent: (P.	O. Box NOT acceptable)			
Name:	Incorp Services, Inc				
Office Address:	17888 67th Court North				
	Loxahatchee	, Florida <u>33470</u>			
	(City)	(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.

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

A. DIRI	ECTORS			
Chairman	: nana Joann Q Pham			
Address:	\$165 Irvine Center Drive Suite 150			
	Irvina CA 926 18		_	
- Vice Chai	rman: INVA Bac M. Pham			
Address:	8105 Irvine Center Drive Suite 150			
7 Iddi 035.	Irvine, CA. 92618			····
Director:	Joann Q Pham			
	8105 Irvine Center Drive Suite 150			
	Irvine, CA 92618			
•	Bac H Pham			, 1,
	8105 Irvine Center Drive Suite 150	E-9	•	74
Addiess.	Irvine, CA 92618	艺艺		علام والمالية
D OFFI		M-3	<u>о</u> ш	***
B. OFFI		FS1	⊋ 0	1
	Joann Q Pham		<u></u>	**
•	8105 Irvine Center Drive Suite 150			*
•	Irvine, CA 92618			
Vice Presi	dent: Bac H Pham			
Address:	8105 Irvine Center Drive Suite 150, Irvine, CA 92618			
	8105 Irvine Center Drive Suite 150, Irvine, CA 92618		·	
Secretary:	Joann Q Pham			
Address:	8105 Irvine Center Dr. Suite 150, Irvine, CA. 921	0 8		
Treasurer:				
Address:	8105 Irvine Center Dr. Sute 150, Irving CA. 92	261	8	
	If necessary, you may attach an addendum to the application listing additional office	rs and/o	r directors.	
13	(Signature of Director or Officer listed in number 12 of the application))		
14.	FOAM) DIAM - 120/2007ADU	,		
- '	(Typed or printed name and capacity of person signing application)			

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

GREENLIGHT FINANCIAL SERVICES

FILE NUMBER:

C2247115

FORMATION DATE:

07/17/2001

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

FILED

OCT 15 PM 1: 54

MEGRETARY OF STATE

ALLAHASSEE FLOORING

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

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of July 09, 2010.

DEBRA BOWEN
Secretary of State

RYM

ND 05 (DEV 4000)