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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : NRAI CORPORATE SERVICES, INC.-IRVINE

Account Number : I20080000054 Phone : (949)955-9585 Fax Number : (800)562-6504

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:			
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FOREIGN PROFIT/NONPROFIT CORPORATION Anchor Loans, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

2012 MAY -9 AM 10: 09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help WAY 10 2012

COVER LETTER

	Filing Section sion of Corporations				
SUBJECT:	Anchor Loans, Inc.				
	N	ame of corporation	ı - must include suffix		
Dear Sir or N	fadam:				
"Certificate of	"Application by Foreight Existence," or "Certinated foreign corporation	ficate of Good Star	Authorization to Transanding" and check are subsets in Florida.	act Business in Florida," omitted to register the	
Please return	all correspondence con	cerning this matte	r to the following:		
Desiree Falc	on				
		Name of	Person		
Anchor Loan	s, Inc.				
		Firm/Con	пралу		
5230 Las Vir	genes Road, Suite #28	5			
		Addr	ess		
Calabasas, C	alifornia 91302			· 5 ~	
		City/State a	nd Zip code	DEC PEC	
info@license	andcomplianceresource			ARE H	
	E-mail ad	dress: (to be used:	for future annual report i	(0.7)	****
For further in	formation concerning to	his matter, please o	all:	9 AM	
Emily Vincent	1	at (800	y 562-6439	97 9	· Secretary
Nam	e of Person		Code & Daytime Teleph		
				,, -	
New Divis Clifto 2661 Tallal	EET/COURIER ADD: Filing Section ion of Corporations in Building Executive Center Circl nassee, FL 32301 check for the following	•	MAILING A New Filing Se Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7	
☑ \$70.00 Fil	ing Fee 🚨 \$78.75]		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy	

under the law of which it is incorporated.

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. Anchor Loans	, Inc.			
	corporation; must include "INCORPORATE Corp," "Inc," "Co," or "Corp.")	D," "COMPANY," "CORPORATION,"		
(If name unavai	able in Florida, enter alternate corporate nan	ne adopted for the purpose of transacting br	usiness in Florida)	
2. California	•	3. 95-4684117		
(State or country under the law of which it is incorporated)		(FEI number, if applicable)		
4. 04/21/1998		Perpetual		
(Date of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")		
6. Upon Qualifica	ation			
	(Date first transacted business	s in Florida, If prior to registration) .1502, P.S., to determine penalty liability)		
7. 5230 Las Virge	nes Road, Suite #285, Calabasas, Califo	rnia 91302		
	(Principal office as	ddress)		
5230 Las Virge	nes Road, Suite #285, Calabasas, Califo	ornia 91302		
	(Current mailing a	ddress)		
8. Mortgage Lend	ding		7A 22	
(Purpose(s) of corporation authorized in home state or	country to be carried out in state of Florida	<u> </u>	
9. Name and street	et address of Florida registered agent: (P	O. Box NOT acceptable)	IZ MAY -9 ECRETARY LAHASSE	
Name:	NRAI Services, Inc.	<u>. </u>		
Office Address:	515 East Park Avenue	•	OF STA	
	Tallahassee	, Florida <u>323</u> 01		
	(City)	(Zip code)	09 09	
Having been nan designated in this further agree to c and I am familiai	gent's acceptance: ned as registered agent and to accept ser application, I hereby accept the appoin comply with the provisions of all statutes with and accept the obligations of my particles, Inc. By:	atment as registered agent and agree to relative to the proper and complete pe	act in this capacity. I	

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

12. Names and business addresses of officers and/or directors:	
A. DIRECTORS	
Chairman:	
Address:	
——————————————————————————————————————	
Vice Chairman:	
Address:	
Address:	
Stephen Dolland	
Director: Stephen Pollack	
Address: 5230 Las Virgenes Road, Suite #285, Calabasas, California 91302	
Director: Jeffrey Lipton	
Address: 5230 Las Virgenes Road, Suite #285, Calabasas, California 91302	·
B. OFFICERS	
President: Stephen Pollack	26 1A1
Address; 5230 Las Virgenes Road, Suite #285, Calabasas, California 91302	2012 HA
7100/055,	HAY -
	SEC 9
Vice President:	7.0
Address:	另一
Sceretary: Stephen Pollack	
Address: 5230 Las Virgenes Road, Suite #285, Calabasas, California 91302	
Treasurer: Stephen Pollack	
Address: 5230 Las Virgenes Road, Suite #285, Calabasas, California 91302	
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. Stephen Pollack - President	

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

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

ANCHOR LOANS, INC.

FILE NUMBER:

C2106273

FORMATION DATE:

04/21/1998

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

DIZMAY -9 AM ID: 09

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 May 07, 2012.

DEBRA BOWEN
Secretary of State