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SECRETARY OF STATE

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COVER LETTER

TO:		Filing Sec on of Cor	tion porations				
SUBJ	ECT:	Heart	land Credit Se	ervic	es Inc.		
SC Do	LC1.				ation - must inclu	ide suffix	
Dear S	ir or Ma	adam:					
"Certif	icate of	Existenc	ion by Foreign Corpo e," or "Certificate of on corporation to trans	Good :	Standing" and cl	neck are subn	t Business in Florida," nitted to register the
Please	return a	ill corresp	ondence concerning t	his m	atter to the follow	wing:	
Mich	ael G	Siancol	а				
				Name	e of Person		
Hea	rtlan	d Cred	lit Services Ind	Э.			
				Firm/	Company		
213	9 Tar	oo St S	Suite 221				
				A	ddress		
Simi	Valle	y CA 9	93063				
				ity/Sta	ate and Zip code		
micha	ael.gia	ancola(@acranet.com				
			E-mail address: (to	be us	sed for future and	nual report no	otification)
For fur	ther inf	ormation	concerning this matte	r, plea	ase call:		
Mich	ael G	iancola	3 at	(805	5 ₎ 584-31	196	
	Name	of Person			rea Code & Day	time Telepho	ne Number
	New F Division Clifton 2661 I	iling Secton of Cor Building	porations 3 Center Circle		Ne Di P.	IAILING AE ew Filing Sec ivision of Co O. Box 6327 allahassee, FL	ction rporations
Enclose	ed is a c	heck for	the following amount	:			
□ \$7	70.00 Fi	ling Fee	\$78.75 Filing Fe Certificate of St	e & atus	\$78.75 Fili Certified C		\$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 Heartland Credit Services 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) (State or country under the law of which it is incorporated)

3. 770440181 2 California (FEI number, if applicable) (Duration: Year corp. will cease to exist or "perpetual") (Date of incorporation) 6. N/A (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7 2139 Tapo Street Suite 221 Simi Valley CA 93063 (Principal office address) same (Current mailing address) 8. Appraisal Management Services (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) InCorp Services, Inc. Name: 17888 67th Court north Office Address: , Florida 33470 (Zip code) Loxahatchee 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	u u
Chairman: Paul Donaldson	12 SE 12
Address: 2139 Tapo Street Suite 221 Simi Valley CA 93063	AUG CREI
	2 元
Vice Chairman: Michael Giancola	
Address: 2139 Tapo Street Suite 221 Simi Valley CA 93063	
Address: 2100 Tapo Chook Canto 221 Chim Valley C. Cocco	<u> </u>
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: Michael Giancola	
Address: 2139 Tapo Street Suite 221 Simi Valley CA 93063	
Address: 2100 rape direct date 221 diffi valley divided	
Vice President: Paul Donaldson	
Address: 2139 Tapo Street Suite 221 Simi Valley CA 93063	
Secretary: Michael Giancola	
Address: 2139 Tapo Street Suite 221 Simi Valley CA 93063	
Treasurer:	
Address:	
NOTE: If necessary, you pray attach apaddendum to the application listing additional officers an	d/or directors.
13. MILL 1	
Signature of Director or Officer	
The officer or director signing this document (and who is listed in number 12 above) affirms that t are true and that he or she is aware that false information submitted in a document to the Department of the D	
third degree felony as provided for in s.817.155, F.S.	
14. Michael Giancola, Hesident (Typed or printed name and capacity of person signing application)	
(Typed or printed name and capacity of person signing application)	

State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

HEARTLAND CREDIT SERVICES INC.

FILE NUMBER:

C1791356

FORMATION DATE:

09/26/1996

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

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 August 21, 2012.

DEBRA BOWEN
Secretary of State

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