# F13000001492

(Requestor's Na	me)
(Address)	
(Address)	
(City/State/Zip/P	Phone #)
PICK-UP WAIT	MAIL
(Business Entity	Name)
(Document Num	nber)
Certified Copies Certifi	cates of Status
Special Instructions to Filing Officer	
Certified Copies Certified	cates of Status





000246258990

04/04/13--01013--005 \*\*78.75

13 APR -4 AHII: 41
SECRETARY OF STATE
ALL ALLSSEE, FLORID

MRD / 4/5/13

#### **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: Catalyst Landing Inc.  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," or "Certificate of Good Standing" 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:
Valorie Kacherian
Valoria Kacherian Name of Person
Cataly (+ landing true
Catalyst landing, True Finn/Company
6530 S Yosemite Street - Svite 310
Address
Green wood Village CO 80111 City/State and Zip code
City/State and Zip code
V Kacher, on excatalyst landing ret  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (720) 440-6687  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:
S70.00 Filing Fee (S78.75 Filing Fee & S78.75 Filing Fee & Certificate of Status (Certified Copy Certificate of Status & Certified Copy Certified Copy (Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy (Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy (Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy (Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy (Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy (Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy (Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy (Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy (Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy (Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy (Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy (Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy (Certified Copy Certified Certifi

#### 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. Catalyst Lending Inc. (Enter name of corporation; must include "DICORPORATED," "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)	
2. COlorado 3. (State or country under the law of which it is incorporated) (FEI number, if applicable)	
4. 10 15 3007 5. Per petual (Duration: Year corp. will cease to exist or "perpetual")	
6	
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
7. 6530 S Yoseroite Street, Suite 310 (Principal office address)  Green wood Village, CO 80111 (Current mailing address)	
(Principal office address)	
Green wood Villege, CO 80111	
(Current mailing address)	
a Decker les lies	
8. Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	<b>i</b>
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	37
Name: NRAI Services True	三十十
Office Address: 1200 South Pine Island Road	多重
Office Address: 1200 South Pine Island Road Plantation Florids _33324	13 型 4 型 1: 51
10. Registered agent's acceptance:	31
Having been named as registered agent and to accept service of process for the above stated corporation at the pla designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacit further agree to comply with the provisions of all stututes relative to the proper and complete performance of my	ce v. I
duties, and I am familiar with and accept the obligations of my position as registered agent.	
1. /1/1 NRAI Services, Inc.	
Wendy D Rea, Assistant Secretary	
(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.

A. DIRECTORS	d/or directors:	FILED
CEO		13 APR -4 AM !!:
Address: 6530 S Yose of Commence of Commen	nite Street - Svite 310 Maye, CO 80111	SECRETARY OF STATE
Vice Chairman: Veria L Yar	nane	
Address: 6530 S Yose	(1)	
Director: David Bran		
Address: 6530 & Yose	mite Street - Juite 310 Maje, co 80111	and satisfactors and the satisfactors are serviced as a service and serviced as a service as a s
Director: Tim De Boege Address: 6530 S Yosex	ite Street - Suite 310	
Greenwood Vi		
B. OFFICERS		
President:		la lânce con la landoule en la childre con la la late de la la la late de la la late de late de la late de late
Address:		
Vice President:		
Address:		· · · · · · · · · · · · · · · · · · ·
Secretary: Valorie Kauneri	ω <b>~</b>	
Address: 6530 & Yosemite († Prensurer: Jeffrey Rudolph  Address: 6530 & Yosemite	red - 5310 - Greenwood V.	Maje, CO 80111
Address: 6530 S Yose mite	Street-5310- Greenwood	Village, CO 80111
NOTE: If necessary, you may attach an addend	um to the application listing additional officers a	
The officer or director signing this document (ar are true and that he or she is aware that false info a third degree felony as provided for in s.817.15	nd who is listed in number 12 above) affirms that primation submitted in a document to the Departr	
14. Kerin A Yaman (Typed or printed name	e, COD & Divector	
(Typed or printed name	and capacity of person signing application)	



#### FILED

13 APR -4 AM 11: 41

SECRETARY OF STATE ALL MASSIE FERMOA

## STATE OF COLORADO

### DEPARTMENT OF STATE

#### **CERTIFICATE**

I, SCOTT GESSLER, SECRETARY OF STATE OF THE STATE OF

COLORADO HEREBY CERTIFY THAT ACCORDING TO THE RECORDS OF THIS OFFICE,

CATALYST LENDING, INC. (COLORADO CORPORATION)

BECAME INCORPORATED UPON FILING ARTICLES OF INCORPORATION DATED OCTOBER 15, 2007.

Dated: March 28, 2013

S. 1. .

SECRETARY OF STATE