

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Dogament Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
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COVER LETTER

TO: New Filing Section		
TO: New Filing Section Division of Corporations		
SUBJECT: Anworth Properties,	Inc.	
	ration - must include suffix	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporatio "Certificate of Existence," or "Certificate of Good above referenced foreign corporation to transact b	f Standing" and check are sub-	
Please return all correspondence concerning this r John Hillman	natter to the following:	
	ne of Person	
Anworth Properties, Inc.		
Firm	/Company	
1299 Ocean Ave., Second Fl	oor	
	Address	
Santa Monica, CA 90401		
•	tate and Zip code	
jhillman@anworth.com		
E-mail address: (to be i	used for future annual report r	notification)
For further information concerning this matter, ple	ease call:	•
Jordana Sarrell at (56	1 \ 8077107	
	Area Code & Daytime Telepho	one Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING AN New Filing Se Division of Co P.O. Box 6327 Tallahassee, F	ction orporations 7
Enclosed is a check for the following amount:		
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	\$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.

Anworth	Properties, Inc.		·
	orporation; must include "INCORPORATED, orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"	
(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business	in Florida)
Maryland	3		
	under the law of which it is incorporated)	(FEI number, if applicable)	
February	² 25, 2014	Perpetual	
	of incorporation)	(Duration: Year corp. will cease to exist or "p	erpetual")
		n Florida, if prior to registration) 502, F.S., to determine penalty liability)	
1299 Oce	•	, Santa Monica, CA 90401	
	(Principal office add		
1299 Oce	an Avenue, Second Floor, S		
	(Current mailing add		
A	all landers are		
·	all lawful purpose		F 005
(Purpose(s	s) of corporation authorized in home state or c	ountry to be carried out in state of Florida)	14 HVB 13
Name and street	et address of Florida registered agent: (P.	O. Box NOT acceptable)	
Name:	Jordana Sarrell, Esq.		3 3 4 3
.ee	5455 N. Federal Hwy. St	e. J	MII: 17
ffice Address:			5
	Boca Raton	, Florida 33487	nf.
	(City)	(Zip code)	
laving been nam esignated in this urther agree to c	s application, I hereby accept the appoint comply with the provisions of all statutes familiar with and accept the obligations		in this capacity.
	(Registered agent's		
1. Attached is a	certificate of existence duly authenticated	d, not more than 90 days prior to delivery of	this application

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 Chairman: Heather U. Baines Address: 1299 Ocean Avenue, Second Floor, Santa Monica, CA 90401 Vice Chairman: Address: **B. OFFICERS** President: Heather U. Baines Address: 1299 Ocean Avenue, Second Floor, Santa Monica, CA 90401 Vice President: Address: Secretary: Thad Brown Address: 1299 Ocean Avenue, Second Floor, Santa Monica, CA 90401 Treasurer: _ Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. 14. HEATHER U. BAINES, PRESIDENT

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

STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT ANWORTH PROPERTIES, INC., INCORPORATED FEBRUARY 25. 2014, IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS MARCH 12, 2014.

Paul B. Anderson Charter Administrator

Band B. Andrew



301 West Preston Street, Baltimore, Maryland 21201 Telephone Balto. Metro (410) 767-1344 / Outside Balto. Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice Fax (410) 333-7097

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