## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092

Fax Number : (850)878-5368

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

### FOREIGN PROFIT/NONPROFIT CORPORATION LD Escrow. Inc.

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

#### COVER LETTER

COTENDETTEN
TO: New Filing Section Division of Corporations
SUBJECT: LD Recrow, Inc.
Name of corporation - must include suffix
Dear Sir or Madarn:
The enclosed "Application by Poreign 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:
Adam Browning
Name of Person
loanDepot.com, LLC
Firm/Company
26642 Towne Centre Drive
Address
Foothill Ranch, CA 92610
City/State and Zip code
·
abrowning@loandepot.com  B-mail address; (to be used for future annual report notification)
For further information concerning this matter, please call:
•
at (
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: MAILING ADDRESS:
New Filing Section New Filing Section
Division of Corporations  Division of Corporations
Clifton Building P.O. Box 6327
2661 Executive Center Cirole Tallahassee, FL 32314 Tallahassee, FL 3230)
Enclosed is a check for the following amount:
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.

(If name unavail	able in Florida, enter alternate corpo	rate name adopted for the purpose of transacting business in	Plorida)	-
2. California		3. 27-0188019		
(State or country	under the law of which it is incorpor	rated) (FEI number, if applicable)		•
4. 05/13/2009		5. Perpetual		
•	of incorporation)	(Duration: Year curp. will ocase to exist or "per	deman.)	
6, 04/01/2014				
		business in Florida, if prior to registration)  1 & 607.1502, F.S., to determine penalty liability)		
# 96672 Terms ()	•			
7, 20012 TOWNS C	mtre Dr., Suits 100, Foothill Ranch, (Principal	office address)		
	<b>V</b>		_	•
\$21110	(Current m	nalling address)	<u> </u>	7
	•	•	<u>[</u>	<b>]</b>
8				APR
Purnace	N 4		11	
tr mluddf	i) of colbournou enpoused (a powe	state or country to be carried out in state of Ploride)	(/) i	0
	•	state or country to be carried out in state of Ploride) gent: (P.O. Box <u>NOT acceptable)</u>	쭒	<del>=</del>
9. Name and atre	et address of Florida registered a	•	SSEE F	•
	•	•	SSEE F	•
9. Name and atre	et address of Florida registered a	•	SSEE F	D AH 10: 48
9. Name and atre Name:	et address of Florida registered a C T Corporation System 1200 South Pine Island Road	gent: (P.O. Box <u>NOT</u> acceptable)	쭒	•
9. Name and atre Name:	c r corporation System  1200 South Pine Island Road  Plantation	•	SSEE F	•
9. Name and atre Name: Office Address:	et address of Florida registered a C T Corporation System 1200 South Pine Island Road Pleatation (City)	gent: (P.O. Box NOT acceptable), Plorida 33324	SSEE F	•
9. Name and atre Name; Office Address;	c address of Florida registered as C T Corporation System 1200 South Pine Island Road Pleasation (City) gent's acceptance:	gent: (P.O. Box NOT acceptable) , Florida 33324 (Zip code)	RY OF STATE	AH 10: 48
9. Name and atre Name: Office Address: 10. Registered a Having been name	C T Corporation System  1200 South Pine Island Road  Pleatation  (City)  gent's acceptance: and as registered agent and to acceptance of the control of the	gent: (P.O. Box NOT acceptable) , Florida 33324 (Zip code)  cept service of process for the above stated corporation	RY OF STATE SSEE FLORIDA deep	AH 10: 48
9. Name and sine Name; Office Address; 10. Registered a Having been nam designated in this further agree to a	C T Corporation System  1200 South Pine Island Road  Pleatation  (City)  gent's acceptance: and as registered agent and to accept the comply with the provisions of all	gent: (P.O. Box NOT acceptable)  , Florida 33324 (Zip code)  cept service of process for the above stated corporation appointment as registered agent and agree to act in statutes relative to the proper and complete performant	SSEE FLORIDA	AH 10: 48
9. Name and sine Name; Office Address; 10. Registered a Having been nam designated in this further agree to a	C T Corporation System  1200 South Pine Island Road  Pleatation  (City)  gent's acceptance: and as registered agent and to accept the comply with the provisions of all	gent: (P.O. Box NOT acceptable) , Florida 33324 (Zip code)  ceept service of process for the above stated corporation appointment as registered agent and agree to act in	SSEE FLORIDA	AH 10: 48
9. Name and sine Name; Office Address; 10. Registered a Having been nam designated in this further agree to a	CT Corporation System  1200 South Pine Island Road  Pleatation  (City)  gent's acceptances  seed as registered agent and to ac  application, I hereby accept the comply with the provisions of all familiar with and accept the obli	gent: (P.O. Box NOT acceptable)  , Florida 33324 (Zip code)  cept service of process for the above stated corporation appointment as registered agent and agree to act in statutes relative to the proper and complete performal gations of my position as registered agent.	SSEE FLORIDA  on at the parties of m	AH 10: 48
9. Name and stree Name: Name: Office Address: 10. Registered a Having been nam designated in this further agree to a duties, and I am j	CT Corporation System  1200 South Pine Island Road  Pleatation  (City)  gent's acceptances  seed as registered agent and to ac  application, I hereby accept the comply with the provisions of all familiar with and accept the obli	gent: (P.O. Box NOT acceptable)  , Florida 33324 (Zip code)  cept service of process for the above stated corporation appointment as registered agent and agree to act in statutes relative to the proper and complete performant	SSEE FLORIDA  on at the parties of m	AH 10: 48

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 SEE ATTACHMENT			
Chairman:			
Address:			
		·	
Vice Chairman:			
Address:			
		_	
Director:			
Address:			
Director:			
Address:			
B. OFFICERS			
President: Betty Kranig		·	
Address: 26672 Towne Centre Dr.,	<b>&gt;</b> \( \( \frac{1}{2} \) \( \frac{1} \) \( \frac{1}{2} \) \( \frac{1}{2} \) \( \frac	**	
Foothill Ranch, CA 92610	<u> 李嵩</u>	ΑPH	****
Vice President:	\$5.50 \$5.50 \$5.50	ā	
Address:	[필급	=	<u> </u>
	<u> </u>	⋽	<u> </u>
Secretary: Peter Macdonald	AIE NO.	<u> </u>	
Address: 26642 Towne Centre Dr., Foothill Ranch, CA 92610			
Treasurer:			
Address:			
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/o	or directors		
13.	<u></u>		<u> </u>
Signature of Director or Officer  The officer or director signing this document (and who is listed in number 12 above) affirms that the are true and that he or she is aware that false information submitted in a document to the Department a third degree felony as provided for in s.817.155, F.S.			
14. Betty Kranig, President  (Typed or printed name and capacity of person signing application)			_
(13ber of houses imme and enhants of herson sixtual abburration)			

### Attachment to Florida Officers & Directors

Full Name:

Officer/Director:

Officer's Title:

Director's Title:

Business Address:

City:

State:

ZIP Code:

Full Name:

Officer/Director:

Officer's Title:

Director's Title:

**Business Address:** 

City:

State:

ZIP Code:

Betty Kranig

Officer Director

President

Director

26672 Towne Centre Dr.,

Foothill Ranch

CA

92610

Anthony Hsich

Director

Director

26642 Towne Centre Dr.

**Poothill Ranch** 

CA

92610

## State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

LD ESCROW, INC.

FILE NUMBER:

C3208922

FORMATION DATE:

05/13/2009

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 Acadifornia.

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 April 07, 2014.

DEBRA BOWEN
Secretary of State