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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : INCORP SERVICES INC

Account Number : I20120000007

Phone Fax Number : (702)866-2500 : (702)866-2689

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

documents Sincorp. com

FOREIGN PROFIT/NONPROFIT CORPORATION Capital of America Investments, Inc.

Certificate of Status	0
Certified Copy	0
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4/21/2014

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COVER LETTER

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TO: New Filing Section Division of Corporation	ıs			
SUBJECT: Capital of Ame	rica Investments, I	nc.		
	Name of corpora		iclude suffix	
Dear Sir or Madam:				
The enclosed "Application by F "Certificate of Existence," or "Cartificate of Existence," or "Cartificate of Existence," or "Cartificate of Existence of Existenc	Certificate of Good !	Standing <mark>" a</mark> n	d check are sub	
Please return all correspondenc	e concerning this ma	atter to the fo	llowing:	
	Ambe	r Regland		
	Name	of Person		
	InCorp S	ervices, Inc		
	Firm/0	Company		
	2360 Corporate	Circle · Su	ite 400	
	_ A -	ddress		
	Henderson,	NV 89074-7	739	
	City/Sta	te and Zip co	ode	
	documents ail address: (to be us	@incorp.co		
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For further information concern	ing this matter, plea	ise call:		
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nber Regiand on behalf of Incorp Se) <u>2) 866-</u> rea Code & I	2500 Daytime Teleph	one Number
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	STREET/COURIER ADDRESS: MAILING ADDRESS: New Filing Section New Filing Section			
New Filing Section Division of Corporation	19		Division of Corporations	
Clifton Building	_	P.O. Box 6327		
2661 Executive Center			Tallahassee, F	L 32314
Tallahassee, FL 32301				
Enclosed is a check for the following	wing amount:			
	8.75 Filing Fee & ertificate of Status		Filing Fee & ed Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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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.

	nerica Investments, Inc.		
	orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	ED," "COMPANY," "CORPORATION,"	
	·		
(If name unaval)	able in Florida, enter alternate corporate na	me adopted for the purpose of transacting business in Florida	a)
California		3. 46-0736752	
	under the law of which it is incorporated)	(FEI number, if applicable)	
08/06/2012	·	5. Perpetual	
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual"	')
Upon Filing			
		ss in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)	
BORO Cambre F	•	7.1202, 1.0., to determine penalty matrixy	
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	(- thiolphi office)	1441933)	
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6080 Center I	Drive, Los Angeles, CA 90045	address)	_
6080 Center I	•	address)	<u> </u>
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Mortgage Bro (Purpose(i	Orive, Los Angeles, CA 90045 (Current mailing and other control of corporation authorized in home state of the address of Florida registered agent: (r country to be carried out in state of Florida) (P.O. Box <u>NOT</u> acceptable)	22
Mortgage Bro (Purpose(i	Orive, Los Angeles, CA 90045 (Current mailing a oker c) of corporation authorized in home state or	r country to be carried out in state of Florida) (P.O. Box NOT acceptable)	22 AH
Mortgage Bro (Purpose(i	Orive, Los Angeles, CA 90045 (Current mailing and other control of corporation authorized in home state of the address of Florida registered agent: (r country to be carried out in state of Florida) (P.O. Box NOT acceptable)	22 Min:
Mortgage Bro (Purpose(s) Name and <u>streat</u> Name:	Orive, Los Angeles, CA 90045 (Current mailing and other control of corporation authorized in home state of the address of Florida registered agent: (InCorp Services, Inc.	r country to be carried out in state of Florida) (P.O. Box NOT acceptable)	22 AH

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.

on behalf of Incorp Services, Inc.

(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
Chairman:
Address:
Vice Chairman:
Address:
Director: Michael Williams
Address: 6080 Center Drive
Los Angeles, CA 90045
Director:
Address:
·
B. OFFICERS
President: Michael Williams
Address: 6080 Center Drive
Los Angeles, CA 90045
Vice President:
Address:
Secretary: Craig Maltman
Address: 6080 Center Drive, Los Angeles, CA 90045
Treasurer; Michael Williams
Address: 6080 Center Drive, Los Angeles, CA 90045
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. Michael Williams, President (Typed or printed name and capacity of person signing application)
4. At Learner annu arturat A. as Larasse arturated by history

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

CAPITAL OF AMERICA INVESTMENTS, INC.

FILE NUMBER:

C3493864

FORMATION DATE:

08/06/2012

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 April 18, 2014.

DEBRA BOWEN Secretary of State

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