

F15000003368

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

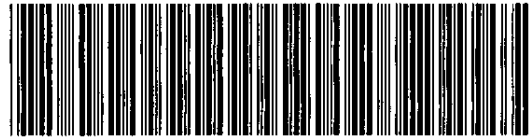
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W15-47183 RA Sign

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S. YOUNG



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FLORIDA DEPARTMENT OF STATE
Division of Corporations SECRETARY OF STATE
TALLAHASSEE, FLORIDA

July 14, 2015

STEVEN SHEASBY
INTEGRITY MORTGAGE LICENSING
1168 DORSET LN
COSTA MESA, CA 92626

SUBJECT: A.S. FINANCIAL CORPORATION
Ref. Number: W15000047183

We have received your document for A.S. FINANCIAL CORPORATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 415A00014728

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: A.S. Financial Corporation

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:

Steven Sheasby

Name of Person

Integrity Mortgage Licensing

Firm/Company

1168 Dorset Ln

Address

Costa Mesa, CA 92626

City/State and Zip code

michelesims0@icloud.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steven Sheasby

Name of Person

at (714) 721-3963

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:

- | | | | |
|--|--|---|---|
| <input checked="" type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &
Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee,
Certificate of Status &
Certified Copy |
|--|--|---|---|

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TALLAHASSEE, FLORIDA

**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. A.S. Financial Corporation

(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)

2. Wyoming

(State or country under the law of which it is incorporated)

3. 47-4055150

(FEI number, if applicable)

4. 5/20/2015

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6.

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1448 Mariner Drive, Walled Lake, MI 48390

(Principal office address)

1448 Mariner Drive, Walled Lake, MI 48390

(Current mailing address)

8. Mortgage Brokering

(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)

Name:

Paracorp Incorporated

Office Address:

236 East 6th Avenue

Tallahassee

(City)

, Florida

32303

(Zip code)

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TALLAHASSEE, FLORIDA

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.

See Attached

(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: Michele Sims

Address: 1448 Mariner Drive
Walled Lake, MI 48390

Vice Chairman: Sharon Sturgeon

Address: 1448 Mariner Drive
Walled Lake, MI 48390

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Michele Sims

Address: 1448 Mariner Drive
Walled Lake, MI 48390

Vice President: Sharon Sturgeon

Address: 1448 Mariner Drive
Walled Lake, MI 48390

Secretary: Sharon Sturgeon

Address: 1448 Mariner Drive, Walled Lake, MI 48390

Treasurer: Michele Sims

Address: 1448 Mariner Drive, Walled Lake, MI 48390

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Michele Sims
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. Michele Sims, President

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

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STATE OF MICHIGAN
TREASURER'S OFFICE



STATE OF FLORIDA
REGISTERED AGENT CONSENT FORM

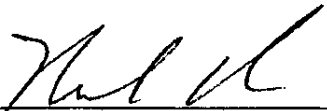
DATE: June 13, 2015

ENTITY NAME: A.S. Financial Corporation

REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated
236 East 6th Avenue
Tallahassee, FL 32303

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in that capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statutes.



Ninh Ho, Assistant Secretary
Paracorp Incorporated

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SECRETARY OF STATE
TALLAHASSEE, FL 32303

STATE OF WYOMING
Office of the Secretary of State

I, EDWARD F. MURRAY, III, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

A.S. FINANCIAL CORPORATION

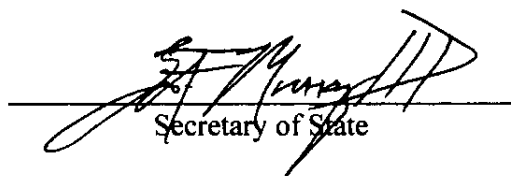
is a
Profit Corporation

formed or qualified under the laws of Wyoming did on **May 20, 2015**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2015-000687183**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 7th day of July, 2015 at 5:17 PM. This certificate is assigned 018124931.




Secretary of State

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TALLAHASSEE, FLORIDA