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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : NORTHWEST REGISTERED AGENT LLC
Account Number : I20090000081
Phone : (509)768-2249
Fax Number : (855)330-1010

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

Email Address: _____

**FOREIGN PROFIT/NONPROFIT CORPORATION
COAST TO COAST LENDING GROUP, INC.**

Certificate of Status	0
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Page Count	04
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AUG 10 2015

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Help

RECEIVED
15 AUG 10 PM 4:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
15 AUG 10 AM 9:04
SECRETARY OF STATE
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. COAST TO COAST LENDING GROUP, INC.

(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. CALIFORNIA

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

3. N/A

(FEI number, if applicable)

4. 11/20/2003

(Date of incorporation)

5. PERPETUAL

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

6. N/A

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 27129 CALLE ARROYO SUITE 1801, SAN JUAN CAPISTRANO, CA 92675

(Principal office address)

27129 CALLE ARROYO SUITE 1801, SAN JUAN CAPISTRANO, CA 92675

(Current mailing address)

8. DIRECT AND BROKER LENDING SERVICES

(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: **REGISTERED AGENTS INC.**

Office Address: **3030 N. Rocky Point Dr, STE 150A**

Tampa

(City)

Florida 33607

(Zip code)

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.



Bill Havre/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.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: VICTOR SIEGEL

Address: 27129 CALLE ARROYO, SUITE 1801

SAN JUAN CAPISTRANO, CA 92675

Director: _____

Address: _____

B. OFFICERS

President: VICTOR SIEGEL

Address: 27129 CALLE ARROYO, SUITE 1801

SAN JUAN CAPISTRANO, CA 92675

Vice President: _____

Address: _____

Secretary: ROGER HERRICK

Address: 27129 CALLE ARROYO, SUITE 1801, SAN JUAN CAPISTRANO, CA 92675

Treasurer: VICTOR SIEGEL

Address: 27129 CALLE ARROYO, SUITE 1801, SAN JUAN CAPISTRANO, CA 92675

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

13. _____

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. VICTOR SIEGEL, PRESIENT

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

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STATE OF FLORIDA
TALLAHASSEE

State of California
Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

COAST TO COAST LENDING GROUP, INC.

FILE NUMBER: C2299420
FORMATION DATE: 11/20/2003
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, ALEX PADILLA, 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 August 05, 2015.

ALEX PADILLA
Secretary of State