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<u> </u>	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UF	P WAIT	MAIL MAIL
-	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of	Status
Special Instructions to Filing Officer:		
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Office Use Only



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SLOKULINY OF STATE
ALLAHASSEE, FLORIDA

T WASHINGTON
OCT 1 0 2016



Corporate and Trade Name Registration

Please contact Mike Norton with any questions or comments at 714-935-2581 xt 301, email is MikeN@essexmortgage.com.

Thank you.

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: DATA MORT GAGE, INC. Name of corporation - must include suffix
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:
MIKE NORTON
MIKE NORTON Name of Person
DATA MORTGAGE, INC. Firm/Company
2200 W. ORANGEWOOD AVE SHITE 150 Address ORANGE, CA 92868 City/State and Zip code
Address
DRANGE, CA 92848
City/State and Zip code
MIKEND ESSEXMORT GAGE, COM E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
MIKE NORTON at (7/4) 935-2581 XT 30/ Name of Person Area Code Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$\frac{1}{2}\$\$ \$78.75 Filing Fee & \$\frac{1}{2}\$\$ \$78.75 Filing Fee & \$\frac{1}{2}\$\$ \$78.75 Filing Fee & \$\frac{1}{2}\$\$ \$87.50 Filing Fee, 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. <u>DATA</u> MORTGAGE, 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
3. 33-0175937

(State or country under the law of which it is incorporated)
4. 3-24-86

(Date of incorporation)

(Date of duration, if other than perpetual) NIA (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 2200 W. ORANGEWOOD AVE SUITE 150 ORANGE, CA
(Principal office address) SAME AS ABOVE
(Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) PARACORP INCORPORATED Office Address: 155 OFFICE PLAZA DR. 15T FLORE

TALLAHASEE , Florida 32301

(City) (Zip code) 9. 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.

Sharon Cooke Assistant Secretary
(Registered agent's signature)

10. 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 Sccretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated,

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: ROLAND WEEDON Address: ZZOO W. ORANBEWOOD AVE, SUITE 150 DRANGE CA 92868 Vice Chairman: Address: _ **B. OFFICERS** President: ROLAND WEEDON Address: 2200 W. ORANGE WOOD AVE, SHITE 150 ORANGE, CA 92868 Secretary: DEBBIE COHEN Address: 2200 W- ORANGEWOOD AVE, SUITE 150, ORANGE CA 92808 Treasurer: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 12. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 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. 13. ROLAND WEEDON- PRESIDENT

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

State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

DATA MORTGAGE, INC.

FILE NUMBER:

FORMATION DATE:

TYPE:

03/24/1986
DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

C1369174

STATUS:

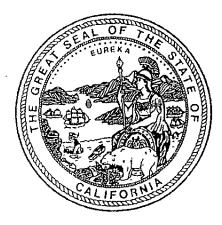
ACTIVE (GOOD STANDING)

16 OCT -7 PK 2: 13
MERCHANT OF STATE
MILEMAN FOR FLORIDA

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 September 27, 2016.

ALEX PADILLA Secretary of State