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.

(((H17000039843 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Pak Number

-: (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : T20010000052

Pnone Fax Number : (323)962-8600 : (323)962-3889

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

Ū

FOREIGN PROFIT/NONPROFIT CORPORATION REVERSE MORTGAGE LENDING, INC.

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

Electronic Filing Menu

Corporate Filing Menu

D. BRUCE FER 13 2017



TO: Régistration Section Division of Corporations

SUBJECT: REVERSE MORTGAGE LENDING, INC.

(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," 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:

Cheyenne Moseley		
Name of the state	(Name of Person)	
Legalzoom.com, Inc.		
	(Firm/Company)	* anad
101 N. Brand Blvd 11th Floor		ALL
	(Address)	<u> </u>
Glendale, CA 91203		NS/S/
	(City/State and Zip code)	PS 0
		The second secon
For further information concerning this matter, please call:		
		<u>o</u>
Cheyenne Moseley	at (800) 773-0888	
(Name of Person)	(Area Code & Daytime Telepho	one Number)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

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 ☐ \$78.75 Filing Fee & Certificate of Status

☐ \$87.50 Filing Pee, 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. REVERSE MORTGAGE LENDING, 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) California (FEI number, if applicable) (State or country under the law of which it is incorporated) 9/23/2015 (Date of incorporation) (Date of duration, if other than perpetual) 01/01/2017 (Date first transacted business in Florida, If prior to registration) (SEE SECTIONS 607.1501 & 607.1502, P.S., to determine penalty liability) 3565 Del Rey St. Suite 302, San Diego, CA 92109 (Principal office adaress) 3565 Dcl Rey St. Suite 302, San Diego, CA 92109 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) United States Corporation Agents, Inc. Name: 13302 Winding Oak Court Suite A Office Address: Tampa (City) 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. Chevenne Moseley, assistant secretary on behalf of United States Corporation Agents, Inc.

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

(Registered agent's signature)

A. DIRECTORS	
Chainnan:	
Address:	
View Ohel	·
Vice Chairman:	
Address:	
Collin Knock	
4955 Ariva Way Apt. 328, San Diego, CA 92123	
Director:	
Address:	
B. OFFICERS Collin Knock President:	
4955 Ariva Way Apt. 328, San Diego, CA 92123 Address:	2017 TALL
	<u>≥≗</u>
Vice President:	> ≥ 1
Address:	
Secretary:	
4955 Ariva Way Apt. 328, San Diego, CA 92123 Address:	P -
Treasurer:	
Address: 4955 Ariva Way Apt. 328, San Diego, CA 92123	
NOTE: If necessary, you may attach an addendum to the application listing addition.	tional officers and/or directors.
Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 about are true and that he or she is aware that false information submitted in a document a third degree felony as provided for in s.817.155, F.S.	
13. Collin Knock, President	
(Typed or printed name and capacity of person signing a	oplication)

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

REVERSE MORTGAGE LENDING, INC.

FILE NUMBER:

C3828478

FORMATION DATE:

09/23/2015

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 February 02, 2017.

ALEX PADILLA Secretary of State