

F18000000469

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

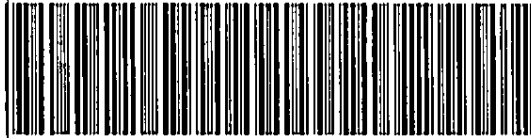
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

JAN 30 2018

Y SULKER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Victor Mortgage 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

2961 W MacArthur Blvd, Suite 209

Address

Santa Ana, CA 92704

City/State and Zip code

matthewcamporeale@hotmail.com

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

For further information concerning this matter, please call:

Steven Sheasby

714

721-3963

at ()

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

☐ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
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.*

1. Victor Mortgage 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. New York	3. 82-3285119
(State or country under the law of which it is incorporated)	(FEI number, if applicable)
4. 10/31/2017	5. Perpetual
(Date of incorporation)	(Date of duration, if other than 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. 510 Clinton Square, Rochester, NY 14604 (Principal office address)	
_____ (Current mailing address, if different)	
8. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)	
Name:	Paracorp Incorporated
Office Address:	155 Office Plaza Drive, 1st Floor
Tallahassee	32301
(City)	(Zip code)

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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.

(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 Secretary 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: Matthew Camporeale

Address: 510 Clinton Square, Rochester, NY 14604

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

B. OFFICERS

President: Matthew Camporeale

Address: 510 Clinton Square, Rochester, NY 14604

Vice President:

Address:

Secretary:

Address:

Treasurer:

Address:

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. Matthew Camporeale, President

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

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SIGN HERE

**State of New York
Department of State } ss:**

I hereby certify, that the Certificate of Incorporation of VICTOR MORTGAGE CORPORATION was filed on 10/31/2017, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

I further certify that no other documents have been filed by such corporation.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 28th day of December
two thousand and seventeen.*

Brendan W. Fitzgerald
Executive Deputy Secretary of State

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ALBANY, N.Y.
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STATE OF FLORIDA

REGISTERED AGENT CONSENT FORM

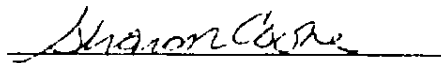
DATE: 12/28/2017

ENTITY NAME: Victor Mortgage Corporation

REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated
155 Office Plaza Drive, 1st Floor
Tallahassee, FL 32301

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



Sharon Cooke, Assistant Secretary
Paracorp Incorporated