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(Re	equestor's Name)	
(Ac	ddress)	<del></del>
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PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Nar	ne)
(D	ocument Number)	
Certified Copies	Certificates	s of Status
	<del>-</del>	
Special Instructions to	Filing Officer:	
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Office Use Only



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#### **COVER LETTER**

TO: Registration Section Division of Corporations			
Fund USA Corp. SUBJECT:			
<del></del>	oration - m	ust include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporati "Certificate of Existence," or "Certificate of God above referenced foreign corporation to transact	od Standin	g" and check are sub	
Please return all correspondence concerning this Steven Sheasby	matter to	he following:	
Na	me of Pers	on	
Integrity Mortgage Licensing			
Fire	n/Compan	y	
2961 W MacArthur Blvd, Suite 209			
	Address		
Santa Ana, CA 92704			
City/	State and Z	lip code	
ansar949@gmail.com			
E-mail address: (to be	used for f	uture annual report r	notification)
For further information concerning this matter, p	lease call:		
Steven Sheasby 71-		721-3963	
<u> </u>	a Code	Daytime Telep	hone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassec, FL 32301		MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7
Enclosed is a check for the following amount:  \$70.00 Filing Fee \$\text{Certificate of Statu}\$		8.75 Filing Fee & crtified Copy	S87.50 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.

"lnc.," "Co" "C	orporation; must include "INCORPORAT orp." "Inc," "Co," or "Corp.")	ED,	"COMPANY," "CORPORATION,"	.,		
,, .						
(If name unavaila	able in Florida, enter alternate corporate na	ame	adopted for the purpose of transacting	business in l	Florida)	
California		3.	47-1327700 3			
(State or country under the law of which it is incorporated)			(FEI number, if applicable)			
6/26/2014		5.	Perpetual			
(Date of incorporation)		- ~.	(Date of duration, if other than perpetual)			
			Florida, if prior to registration)			
1701 12 12	·	97.1:	502, F.S., to determine penalty liability	<b>'</b> )		
1701 Von Karma	n Ste.#100, Newport Beach, CA 92660				·	
	(Pr	incip	al office address)			
<del></del>	(Current n	ıailir	ng address, if different)		<del></del>	
	(Current n	ailir	ng address, if different)			
Name and stree	(Current n		,		<del></del>	
	·		,			
Name and stree	et address of Florida registered agent:  Paracorp Incorporated		,		18 18	
Name:	et address of Florida registered agent:		,	:	18 T	
Name:	et address of Florida registered agent:  Paracorp Incorporated		D. Box <u>NOT</u> acceptable)	<i>:</i>	-A 60 7-7 	
Name:	Paracorp Incorporated  155 Office Plaza Drive, 1st Floor		D. Box <u>NOT</u> acceptable)	; ;	18 5.7 4 7.1	
Name: fice Address:	Paracorp Incorporated  155 Office Plaza Drive, 1st Floor  Tallahassee  (City)		D. Box NOT acceptable) , Florida		18 12 7 14 7 12:	
Name: fice Address:  Registered age	Paracorp Incorporated  155 Office Plaza Drive, 1st Floor  Tallahassee  (City)	(P.C	D. Box NOT acceptable) , Florida 32301 (Zip code)	<i>:</i>	157 14 PA 2:2	
Name: fice Address:  Registered againing been name	Paracorp Incorporated  155 Office Plaza Drive, 1st Floor  Tallahassee  (City)  ent's acceptance:  seed as registered agent and to accept seed agent and to accept seed agent and to accept seed agent	(P.C	D. Box NOT acceptable) , Florida 32301(Zip code)  ice of process for the above stated	-	To the pl	
Name: fice Address:  Registered againing been naming to the signated in this	Paracorp Incorporated  155 Office Plaza Drive, 1st Floor  Tallahassee  (City)	(P.C	D. Box NOT acceptable) , Florida 32301, [Zip code]  ice of process for the above stated ment as registered agent and agree	e to act in t	in at the pl	
Name: fice Address:  Registered agaving been namesignated in this rther agree to c	Paracorp Incorporated  155 Office Plaza Drive, 1st Floor  Tallahassee  (City)  ent's acceptance:  led as registered agent and to accept so application, I hereby accept the application, I hereby accept the application of the second se	(P.(	D. Box NOT acceptable) , Florida 32301, Florida (Zip code)  ice of process for the above stated ment as registered agent and agree telative to the proper and complete	e to act in t	in at the plants capacit	
Name: fice Address:  Registered agoing been namesignated in this other agree to c	Paracorp Incorporated  155 Office Plaza Drive, 1st Floor  Tallahassee  (City)  ent's acceptance:  red as registered agent and to accept so application, I hereby accept the application of all statu	(P.(	D. Box NOT acceptable) , Florida 32301, Florida (Zip code)  ice of process for the above stated ment as registered agent and agree telative to the proper and complete	e to act in t	in at the pl	
Name: fice Address:  Registered agaving been namesignated in this rther agree to c	Paracorp Incorporated  155 Office Plaza Drive, 1st Floor  Tallahassee  (City)  ent's acceptance:  red as registered agent and to accept so application, I hereby accept the application of all statu	(P.(	D. Box NOT acceptable) , Florida 32301, Florida (Zip code)  ice of process for the above stated ment as registered agent and agree telative to the proper and complete	e to act in t	in at the pl	

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: Ansar Khan 4701 Von Karman Ste.#100, Newport Beach, CA 92660 Address: Vice Chairman: Address: \_\_\_\_\_ Director: Address: Director: \_ Address: **B. OFFICERS** Ansar Khan President: 4701 Von Karman Ste.#100, Newport Beach, CA 92660 Address: Shawn Azadian Vice President: Ansar Khan Address: Secretary: \_ Address: Treasurer: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 12. \_\_\_\_\_ SIGN HERE 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. Ansar Khan, President (Typed or printed name and capacity of person signing application)

#### STATE OF FLORIDA

#### REGISTERED AGENT CONSENT FORM

DATE: 2/10/2018

ENTITY NAME: Fund USA Corp.

#### 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 Statues.

Sharon Cooke, Assistant Secretary

Shann Care

Paracorp Incorporated

### State of California

## Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

FUND USA CORP.

FILE NUMBER:

C3688910

FORMATION DATE:

06/26/2014

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 26, 2018.

ALEX PADILLA Secretary of State