

F18000001572

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

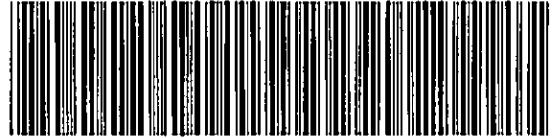
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 8, 2018

MARIA C THOMSON-FRADY  
1574 NIGHTHAWK LN  
GULF BREEZE, FL 32563

SUBJECT: BONNEVILLE FINANCIAL SERVICES, INC.  
Ref. Number: W18000022780

We have received your document for BONNEVILLE FINANCIAL SERVICES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker  
Regulatory Specialist II

Letter Number: 618A00004746

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Bonneville Financial Services, 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," 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:

Maria Thomson-Frady  
Name of Person  
Bonneville Financial Services  
Firm/Company  
1574 Night Hawk Ln  
Address  
Golf Breeze, FL 32563  
City/State and Zip code  
MariaThomson9@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maria Thomson-Frady at ( 801 ) 864 2071  
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. Bonneville Financial Services, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

Bayville Mortgage  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Utah 3. ITIN # 26-1988579  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 2/14/2008 5. N/A  
(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. 1574 Nighthawk Ln Gulf Breeze/FL 32563  
(Principal office address)

\_\_\_\_\_  
(Current mailing address, if different)

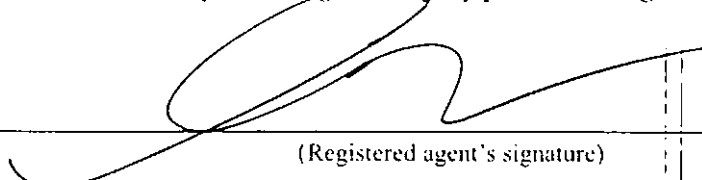
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Maria C. Thouson-Frady

Office Address: 1574 Nighthawk Ln  
Gulf Breeze, Florida 32563  
(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.*

  
(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.

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## 11. Names and business addresses of officers and/or directors:

## A. DIRECTORS

Chairman: Maria C Thomson-FradyAddress: 1574 Nighthawk Ln, Gulf Breeze FL 32563Vice Chairman: Leo B SoaresAddress: 1009 Allington Dr, N Salt Lake UT 84054Director: James ParkAddress: 4392 Harvest Moon Dr, South Jordan UT 84095

Director: \_\_\_\_\_

Address: \_\_\_\_\_

## B. OFFICERS

President: Maria C Thomson-FradyAddress: 1574 Nighthawk Ln, Gulf Breeze FL 32563

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Leo B SoaresAddress: 1009 Allington Dr, N. Salt Lake UT 84054

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. Maria C Thomson-Frady - President  
(Typed or printed name and capacity of person signing application)



**Utah Department of Commerce  
Division of Corporations & Commercial Code**

160 East 300 South, 2nd Floor, PO Box 146705

Salt Lake City, UT 84114-6705

Service Center: (801) 530-4849

Toll Free: (877) 526-3994 Utah Residents

Fax: (801) 530-6438

Web Site: <http://www.commerce.utah.gov>

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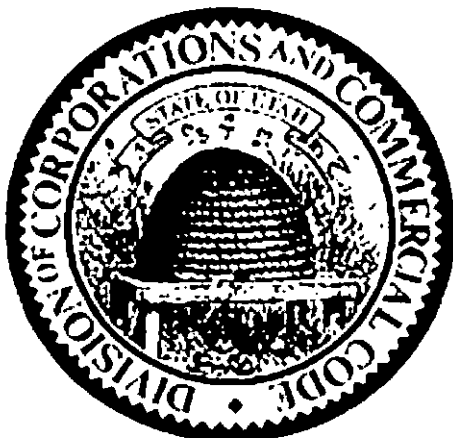
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## **CERTIFICATE OF EXISTENCE**

**Registration Number:** 6915846-0142  
**Business Name:** BONNEVILLE FINANCIAL SERVICES, INC.  
**Registered Date:** February 14, 2008  
**Entity Type:** Corporation - Domestic - Profit  
**Current Status:** Good Standing

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (unless Delinquent), and, that Articles of Dissolution have not been filed.

18 APR - 3 12 54 PM '18



*Kathy Berg*

Kathy Berg  
Director  
Division of Corporations and Commercial Code