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NAME:

KAMA'AINA MORTGAGE GROUP

TYPE OF FILING: APPLICATION

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AUTHORIZATION: ABBIE/PAUL HODGE COLDINE + lodge

COVER LETTER

	stration Sec					
SUBJECT:		Mortgage Group In	c.			
SUBJECT:		Name of	f corporation	- must include suffix		
Dear Sir or M	1adam:					
"Certificate of	of Existence	on by Foreign Cor ;" or "Certificate of a corporation to tra	of Good Stan	Authorization to Transa ding" and check are sub ss in Florida.	ct Business in Flo omitted to register	orida,'' the
Please return Brian Daniel I		ondence concernir	ng this matter	to the following:		
			Name of I	Person		
Kama'aina Mo	ortgage Grou	p Inc.				
7 Waterfront 1	Plaza 500 Al	a Moana Blvd., Suit	Firm/Com e400-456	pany		* 7
-			Addre			,
Honolulu, HI.	96813		rtuit	33		
			City/State as	nd Zip code		
brian@kmgha	ıwaii.com					<u> </u>
		E-mail address:	(to be used f	or future annual report	notification)	φ
For further in	nformation o	concerning this ma	atter, please c	all:		w
Brian Bender		808 at (426-7661			
Nan	ie of Persor		Area Code	Daytime Telep	hone Number	_
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		i:	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			
Enclosed is a	check for t	he following amo	unt:			
☐ \$70.00 Fi	ling Fee	☐ \$78.75 Filing Certificate of		\$78.75 Filing Fee & Certified Copy	\$87.50 Filin Certificate Certified C	of Status &

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.

	tgage Group Inc.		
	orporation; must include "INCORPORATED," "Corp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATION,"	
(If name unavaila	able in Florida, enter alternate corporate name ado	pted for the purpose of transacting b	usiness in Florida)
Hawaii	3.		
(State or country 04/25/2014	•	(FEI number, if applicable)	
(Date	of incorporation)	(Date of duration, if other than perpetual)	
	(Date first transacted business in Fl (SEE SECTIONS 607.1501 & 607.1502 Suite 230, San Diego, CA. 92131	F.S., to determine penalty liability)	
	•	office address)	
10620 Treena St.	Suite 230, San Diego, CA. 92131	10.00	
Name and stree	Current mailing a et address of Florida registered agent: (P.O. I	ddress, if different) Box NOT acceptable)	
Name:	Paracorp Incorporated		·
Office Address:	155 Office Plaza Drive	_	•
	Tallahassee	32301 , Florida	÷
	(City)	(Zip code)	ان د_

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.

Jody Moria, Asst 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 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 Brian Bender Chairman: 11361 Wills Creek Road, San Diego, California 92131 Address: _ Vice Chairman: Address: Director: Address: ___ Director: Address: ____ **B. OFFICERS** Brian Bender President: ___ 11361 Wills Creek Road, San Diego, California 92131 Address: ____ Vice President: Secretary: Treasurer: __ Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. Brian Daniel Bender C



Department of Commerce and Consumer Affairs

CERTIFICATE OF GOOD STANDING

I, the undersigned Director of Commerce and Consumer Affairs of the State of Hawaii, do hereby certify that according to the records of this Department,

KAMA'AINA MORTGAGE GROUP INC.

was incorporated under the laws of Hawaii on 04/25/2014; and that it is an existing corporation in good standing, and is duly authorized to transact business.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of the Department of Commerce and Consumer Affairs, at Honolulu, Hawaii.

Dated: September 18, 2018

Cacamit awar Calm

Director of Commerce and Consumer Affairs