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.

(((H19000113272 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

Fax Number : (850) 617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : 120160000017 Phone : (855)498-5500 Fax Number : (800)432-3622

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

Email Address:

FOREIGN PROFIT/NONPROFIT CORPORATION ONLINE LOANS INC.

Certificate of Status	. 0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

***PLEASE GIVE THE ORIGINAL SUBMISSION DATE AS THE FILE

S. PRATHE

142 - 3 LA

Electronic Filing Menu

Corporate Filing Menu

Help



April 5, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CAPITOL SERVICES, INC.

SUBJECT: ONLINE LOANS INC.

REF: W19000034837

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet. We have received your electronically transmitted document. However, the document was submitted under the wrong electronic filing type and cannot be processed by this office.

To proceed, you must abandon this filing and resubmit your filing under the appropriate electronic filing type.

If you have any further questions concerning your document, please call (850) 245-6052.

KYLE D BRUMBLEY
Regulatory Specialist II
New Filing Section

FAX Aud. #: H19000111928 Letter Number: 719A00006785

Kim Tadlock 8004323622

Kim Tadlock

From: faxfinder@capitolservices.com
Sent: Thursday, April 04, 2019 2:06 PM

To: Kim Tadlock

Subject: FaxFinder Fax Notification: Successfully sent fax to 850-617-6381
Attachments: fax_outbound_850-617-6381_20190404_130527_00002083-0000.pdf

Create Time: 04/04/2019 01:02:31 PM Schedule Time: 04/04/2019 01:05:27 PM

State: sent

Schedule Message: Successfully sent fax

Hangup code: 0

Try #: 1

Username: admin

Sender name: Kim Tadlock

Sender email: ktadlock@capitolservices.com Sender phone: 855-498-5500 Sender fax: 800-432-3622 Sender org: Capitol

Services, Inc. Subject: Max tries: 5 Try interval: 600 Priority: 3 Pages: 6

Recipient fax: 850-617-6381

Recipient phone:
Recipient name:
Recipient org: FL SOS
Use cover page: true
Receipt: always
Print receipt: never
Print receipt printer:

Print receipt first page: false

Fax Page Size: auto

COVER LETTER

TO:	Registration Section				
	Division of Corporations				
	ONLINE LOANS INC.				
SUBJ					-
	Nai	ne of corpora	tion -	- must include suffix	
Dear S	ir or Madam:				
"Certif	closed "Application by Foreign ficate of Existence," or "Certific referenced foreign corporation	cate of Good S	Stanc	Authorization to Transact Business in Florida," ding" and check are submitted to register the is in Florida.	
Please Jackie	return all correspondence conce Hodes	erning this ma	alter t	to the following:	
		Name	of P	Person	-
J2 Leg	al Group, PLLC	1 1-11-11			
			~		_
3470 N	V. Miami Ave., Upper Suite	Firm/C	∪omţ	pany	
		A	ddre	ss	-
Miami	, FL 33127				
		City/Sta	te an	id Zip code	-
will@e	onlineloans.com	4-7		- F	
_	E-mail add	ress: (to-be-us	ed fo	or future annual-report notification)	_
For fu	rther information concerning th	is matter, plea	ise ca	all:	
Will Gendron 813			732-4742		
,,,,,,,		at ()	
	Name of Person	- Area	Code	- Daytime Telephone Number	
	STREET/COURIER ADDR	RESS:		MAILING ADDRESS:	
	Registration Section			Registration Section Division of Corporations	
Division of Corporations			P.O. Box 6327		
	Clifton Building 2661 Executive Center Circle			Tallahassee, FL 32314	
	Tallahassee, FL 32301	•			
Enclos	sed is a check for the following	amount:			
n \$7	0.00 Filing Fee r \$78.75 F	iling Fee &	r	\$78.75 Filing Fee & r \$87.50 Filing Fee,	
		atc of Status		Certified Copy Certificate of Status Certified Copy	; &

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1				
•	rporation; must include "INCORPORATED," rp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	•	
Delaware	ble in Florida, enter alternate corporate name			ia)
2.	er the law of which it is incorporated)	(TT/Y b '6	1.3	
April 2, 2019				
4	of incorporation) 5.			
April 2, 2019	of incorporation)	(Date of duration, if other tr	nan perpetual)	
6				
	(Date first transacted business in	i Florida, if prior to registration) 602, F.S., to determine penalty liability	J)	
78 Southwest 7th	Street, 5th Floor, Miami, FL 33130	oz, F.S., to determine penanty nating	"	
′ '		al office address)		
	•			
		10.100		
	(Current maint	ng address, if different)	ਕ ੰ ਹੈ	2
			MAPR-4 AMIO	्र व्यक्त
8. Name and street	address of Florida registered agent: (P.C	D. Box NOT acceptable)	્રે સ્ટ્રે	
	Rocco Savage		<u> </u>	
Name:			£.:	×
	78 Southwest 7th Street, 5th Floor			
Office Address:	<u> </u>		_ 5 5	
	Miami	33130	AM 10: 1,9	_
	(City)	, Florida (Zip code)	mi 9	
	(City)	(zp code)		
9. Registered age	nt's accentance			
Having been name	nt s acceptance. ed as registered agent and to accept servi	ce of process for the above stated	corporation at t	he place
	application, I hereby accept the appointm			
further agree to co	imply with the provisions of all statutes r	elative to the proper and complete	performance o	f my
	umiliar with and accept the obligations of	f my position as registered agent.		
auues, ana 1 am ja				
auues, ana 1 am ja				
auues, ana 1 am ja	- DocuSigned by:			
auties, and I am Jo	-Docusional by:			

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. DIRE	ECTORS Rocco Savage			
Chairman	78 Southwest 7th Street			 .
Address:	Miami, FL 33130			
-				
Vice Chai	William Gendron man;			
Address:	78 Southwest 7th Street			
	Miami, FL 33130			
Director:				
Address:				·
Director:			-	
Address:		<u> </u>		
B. OFF	ICERS			
resident:	Rocco Savage			
	78 Southwest 7th Street			
Address:	Miami, FL 33130			
Zice Presi	ident: William Gendron		_	
Vice Pres and CO Address:	78 Southwest 7th Street			
woress.	Miami, FL 33130	;	20	
		35.6	19 A	
Secretary:			78	8
		- ३- ५	 _	1
Freasurer	·	<u>}</u>	<u>A</u>	2 <u>0 0</u>
Address:			<u>.</u>	
NOTE:	If necessary, you may attach an addendum to the application listing additional office	cers and/or di	r ect ors.	
12. Foces	Savage			
— Ger	Signature of Director or Officer	on that this facti	e etotad	harain
The offic are true a	eer or director signing this document (and who is listed in number 11 above) affirm and that he or she is aware that false information submitted in a document to the De	epartment of S	tate cor	istitutes
a third de	egree felony as provided for in s.817.155, F.S.			
13	co Savage, Chairman & President			
	(Typed or printed name and capacity of person signing application)		

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ONLINE LOANS INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE FOURTH DAY OF APRIL, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ONLINE LOANS INC." WAS INCORPORATED ON THE SECOND DAY OF APRIL, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

7356010 8300 SR# 20192544554

You may verify this certificate online at corp.delaware.gov/authwer.shtml

Authentication: 202577930

Date: 04-04-19