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PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

5/27/20

NAME: DASFC, INC.

TYPE OF FILING: APPLICATION

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AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

	gistration Section						
	DASEC, INC						
SUBJEC	1:	Name of	corporation	- must inc	lude suffix		
Dear Sir or	· Madam:						
"Certificati		or "Certificate of	f Good Star	nding" and	check are sul	act Business in Flori bmitted to register th	
Please retu Steven Shea	rn all correspond asby	dence concernin	g this matte	r to the foll	owing;		
			Name of	Person		. 2 2	
Integrity M	ortgage Licensing						
2961 W Ma	ncArthur Blvd, Su	ite 209	Firm/Com	pany			
Santa Ana,	CA 92704		Addre	ess			
dasfcinc@g	gmail.com		City/State a	nd Zip code	e		2029
	_ -	E-mail address:	(to be used	for future a	nnual report	notification)	
For further	information cor	cerning this ma	iter, please o	all:			27
Steven Shea	asby		714	721-396	53		ਹਾ: : :
Na	ame of Person	a	Area Cod	e D	aytime Telep	phone Number	
Re Div Cli 260	REET/COURI gistration Section vision of Corpor ifton Building 61 Executive Ce Ilahassee, FL 32	n ations nter Circle		F E F	MAILING A Registration S Division of C P.O. Box 632 Callahassee, I	Section orporations 7	
Enclosed is	s a check for the	following amou	nt:				
\$70.00	Filing Fee 🛭	\$78.75 Filing Certificate of		\$78.75 Fi Certified	iling Fee & Copy	□ \$87.50 Filing Certificate of Certified Cop	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.

*Inc.," "Co.," "Co	orporation; must include "INCORPORATED, orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"	
1110., 001,	, , , , , , , , , , , , , , , , , , , ,		
(It'name unavait	ble in Florida, enter alternate corporate name	adopted for the purpose of transacting busin	ess in Florida)
California		83-3900024	
	y under the law of which it is incorporated)	(FEI number, if applicable	e)
02/28/2019		Perpetual	
	of incorporation) 5	(Date of duration, if other than pe	erpetual)
`	•		
	(Date first transacted business	in Florida, if prior to registration)	
	•	1502, F.S., to determine penalty liability)	
0640 Moontide	Court, Temecula, CA 92592		
	(Princ	ipal office address)	
	(Current mail	ing address, if different)	
		_	
Name and <u>stre</u>	et address of Florida registered agent: (P		
	et address of Florida registered agent: (P Paracorp Incorporated		
Name and <u>stre</u> Name:	Paracorp Incorporated		2026
Name:			2020 !
Name:	Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallabaseses	.O. Box <u>NOT</u> acceptable)	2020 11 11 2
Name:	Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallabaseses	.O. Box NOT acceptable)	2020! *27
Name: fice Address:	Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee (City)	.O. Box <u>NOT</u> acceptable)	2020 : "27 Pi
Name: fice Address: Registered ag	Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee (City) gent's acceptance:	.O. Box NOT acceptable) , Florida 32301 (Zip code)	poration at the pla
Name: fice Address: Registered againing been name;	Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee (City) gent's acceptance: med as registered agent and to accept set acceptance and to accept the appointment of	O. Box NOT acceptable) 32301 Florida (Zip code) rvice of process for the above stated corporate as registered agent and agree to	poration at the pla act in this capacit
Name: fice Address: Registered agaving been nansignated in this	Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee (City) gent's acceptance: med as registered agent and to accept sets application, I hereby accept the appoint comply with the provisions of all statute.	O. Box NOT acceptable) 32301 (Zip code) rvice of process for the above stated corputent as registered agent and agree to seriative to the proper and complete per	poration at the pla act in this capacit
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Name: fice Address: Registered agaving been nansignated in this	Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee (City) gent's acceptance: med as registered agent and to accept sets application, I hereby accept the appoint comply with the provisions of all statute.	O. Box NOT acceptable) 32301 , Florida (Zip code) rvice of process for the above stated corputent as registered agent and agree to a relative to the proper and complete per of my position as registered agent.	poration at the ple act in this capacit

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. DIRI	ECTORS Daniel Smith	
Chairman	•	
Address:	30640 Moontide Court, Temecula, CA 92592	· · · · · · · · · · · · · · · · · · ·
,		<u>-</u> <u>-</u> -
Vice Chai	irman:	<u>-</u>
Address:		·
_		
Director:		
Director		
		
Address:		
n 0.000	- CORDO	
B. OFF	Daniel Smith	
President:		
Address:	2007 Medinia Court, 70000000, CTV 72372	
		7.9.Tu
Vice Presi	ident:	
Address:		.>
		7
Secretary:	Daniel Smith	·
Address:	30640 Moontide Court, Temecula, CA 92592	S)
Treasurer:	Daniel Smith	
Address:	30640 Moontide Court, Temecula, CA 92592	
NOTE:	If necessary, you-may-attach an addendum to the application listing additional officers at	nd/or directors
12.	an addendant to the appreciation insting additional officers at	SOUTHERS
-	Signature of Director or Officer	
The offic	er or director signing this document (and who is listed in number 11 above) affirms that ind that he or she is aware that false information submitted in a document to the Departm	the facts stated herein
	gree felony as provided for in s.817.155, F.S.	ent of State constitutes
13. Danie	el Smith, President	
	(Typed or printed name and canacity of paren signing application)	

STATE OF FLORIDA

REGISTERED AGENT CONSENT FORM

DATE: 5/27/2020

ENTITY NAME: DASFC, Inc.

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.

Leticia Herrera, Assistant Secretary

Paracorp Incorporated

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

DASFC, INC.

FILE NUMBER: FORMATION DATE:

C4249446 02/28/2019

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:n California this day of May 20, 2020.

ALEX PADILLA Secretary of State