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(Re	equestor's Name)			
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S. FRANKLIN AUG - 6 2022

COVER LETTER

TO: Registra Division	tion Section of Corporations					
SUBJECT: U	pwell Mortgage, Inc.					
SOBOBCY: _		Same of corporati	on - must	include suffix		
Dear Sir or Mad	am:					
"Certificate of E	application by Forei existence," or "Certi d foreign corporation	ificate of Good S	tauding" t	ınd check are subi		
Please return all	correspondence co	ncerning this mat	ter to the	following:		
Jeff Bell						
		Name	of Person	· · · · · · · · · · · · · · · · · · ·		262
Upwell Mortgage	, Inc.					2622 1-1 1-1
		Firm/C	ompany		,,,	1
800 Bellevue Wa	y NE, Suite 500					
		Ad	dress			
Bellevue, WA 98	004					ćū
		City/Stat	e and Zip	code		
jeff@upwellmort						
	E-mail a	ddress: (to be use	d for futu	re annual report n	notification)	
For further infor	mation concerning	this matter, pleas	e call:			
Jeff Bell		425 at (891-2200			
Name (of Person	Area C	ode	Daytime Telepl	hone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			
	•		□ \$ 78.7	'ATE 75 Filing Fee & fied Copy	S87.50 Filing Certificate of Certified Co	f Status &

APPLICATION BY FORE!GN 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.

Upwell Mortgag	ge, me.				
		,D,	"COMPANY," "CORPORATION,"		
(If name unavail	able in Florida, enter alternate corporate nar	ne	adopted for the purpose of transacting business in Florid	da)	
WA		3 82-4693155			
(State or counti	r country under the law of which it is incorporated)		(FEI number, if applicable)		
3/7/18		5.			
(Date of incorporation)		٠.	(Date of duration, if other than perpetual)		
None					
	•				
800 Bellevue Wa	· ·		and the second policy liberary,		
	(Principal of	offi	ce street address)		
Same					
	(Current ma	ilin	g address, if different)		
Name and street	et address of Florida registered agent: ()	р С) Box NOT accentable)	73.07	
. vame una <u>su o</u>			1. Dox 11051_deceptable)]~	
Name:	- aut Dieguez.			ı	
ffice Address:	1928 South Patrick Drive				
	Indian Harbor Beach		Florida 32937	 	
•••	(City)		(Zip code)	 	
	(Enter name of c "Inc.," "Co.," "C (If name unavail WA (State or count) 3/7/18 (Date None Name Name and streethers and streethers)	(Enter name of corporation; must include "INCORPORATE" "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name was a second of the law of which it is incorporated) 3/7/18 (Date of incorporation) None (Date first transacted busines (SEE SECTIONS 607.1501 & 607.800 Bellevue Way NE, Suite 500, Bellevue, WA 98004 (Principal of Same) (Current material Dieguez) Name: Paul Dieguez 1928 South Patrick Drive Indian Harbor Beach	(Enter name of corporation; must include "INCORPORATED," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name at the second	(linter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "inc.," "Co.," "Corp," "Inc.," "Co.," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida WA 3. (State or country under the law of which it is incorporated) (Date of incorporation) None (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 800 Bellevue Way NE, Suite 500, Bellevue, WA 98004 (Principal office street address) Same (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: 1928 South Patrick Drive Indian Harbor Beach Florida 32937	

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.

A. DIRECTORS				
□Chairman	Jeff Bell Name:	□ Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
■Director	Yarrow Point, WA 98004	Director		
President		□President		
□Vice President		□Vice President		
Secretary	Treasurer	Secretary		☐'Treasurer
Other	Other	[]Other		□Other
☐ Chairman ☐ Vice Chairman ☐ Director ☐ President ☐ Vice President ☐ Secretary	Megan Bell Name: 9432 Points Drive NE Address: Yarrow Point, WA 98004	□ Chairman □ Vice Chairman □ Director □ President □ Vice President □ Secretary	Address:	2€22 -
□Other	Other	Other		Other
□Chairman □Vice Chairman □Director □President	Name:	□Chairman □Vice Chairman □Director □President	Address:	P:
□Vice President		☐ Vice President		
☐ Secretary	∐Treasurei	□ Secretary		Treasurer
⊡Other	[]Other	[]Other		□Other
The officer or dire she is aware that fit s.817.155, F.S.	Use an attachment to report more than six (6). The added to the index when filing your Florida Dep Signature of Director signing this document (and who is listed in malse information submitted in a document to the D	entment of State Annual Receiver or Officer umber 11 above) affirms the	eport form.	ated herein are true and that he c
13	OCH DON			



Secretary of State

1, STEVE R. HOBBS. Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE

OF

UPWELL MORTGAGE, INC.

I CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 03/07/2018.

I FURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest, and penalties owed and collected through the Secretary of State have been paid.

1 FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

R Hobbe

Steve R. Hobbs, Secretary of State

Date Issued: 07/28/2022