

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: Nationwide Funding Group Ltd  
(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", 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:

Maureen Cahalan  
(Name of Person)  
Nationwide Funding Group Ltd  
(Firm/Company)  
35-325 Date Palm Dr # 251  
(Address)  
Cathedral City CA 92234  
(City/State/Zip)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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\*\*\*\*\*78.75 \*\*\*\*\*78.75

Should you need to call someone concerning this matter, please call:

Maureen Cahalan at (760) 770 1999  
(Name of Person) (Area Code & Daytime Telephone Number)

W99-14693

STREET ADDRESS:

Qualification/Tax Lien Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien 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



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

June 24, 1999

MAUREEN CAHALAN  
NATIONWIDE FUNDING GROUP LTD  
35-325 DATE PALM DR. #251  
CATHEDRAL CITY, CA 92234

SUBJECT: NATIONWIDE FUNDING GROUP LTD.  
Ref. Number: W99000014693

We have received your document for NATIONWIDE FUNDING GROUP LTD. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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) 487-6097.

Michael Mays  
Document Specialist

Letter Number: 199A00033565

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Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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. Nationwide Funding Group Ltd., Corporation  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. North Carolina 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. April 19, 1999 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. upon receipt of license  
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 35-325 Date Palm Dr # 251  
Cathedral City CA 92234  
(Current mailing address)

8. mortgage banking  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: Sam Cohen

Office Address: 5204 B Europa Dr.  
Boynton Beach, Florida, 33431  
(Zip code)

10. 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.

Sam Cohen  
(Registered agent's signature)

11. 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.

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

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**A. DIRECTORS (Street address only - P.O. Box NOT acceptable)**

Chairman: Ann Morrison

Address: 40380 Desert Creek Lane  
Rancho Mirage CA 92270

Vice Chairman: \_\_\_\_\_

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

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

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

Director: Maureen Cahalan

Address: 10 Windwood Pass  
Dana Point CA 92629

**B. OFFICERS (Street address only - P.O. Box NOT acceptable)**

President: Ann Morrison

Address: 40380 Desert Creek Ln.  
Rancho Mirage CA 92270

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

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

Secretary: Maureen Cahalan

Address: 10 Windwood Pass  
Dana Point CA 92629

Treasurer: \_\_\_\_\_

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

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**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Maureen Cahalan  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Maureen Cahalan Corporate Secretary/ Director  
(Typed or printed name and capacity of person signing application)

# STATE OF NORTH CAROLINA



Department of The  
Secretary of State

## CERTIFICATE OF EXISTENCE

I, **ELAINE F. MARSHALL**, *Secretary of State of the State of North Carolina*, do hereby certify that

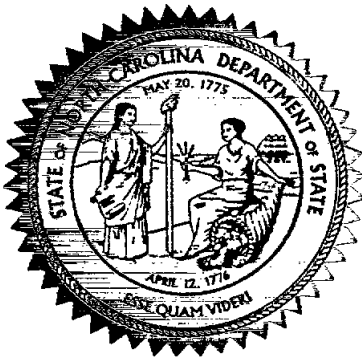
**NATIONWIDE FUNDING GROUP LTD.**

*is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 19th day of April, 1999, with its period of duration being perpetual.*

I **FURTHER** certify that the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by G.S. 55-16-22 **has been** delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

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DIVISION OF CORPORATIONS

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**IN WITNESS WHEREOF**, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 21st day of May, 1999.

*Elaine F. Marshall*

Secretary of State

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