

MIL0000000734

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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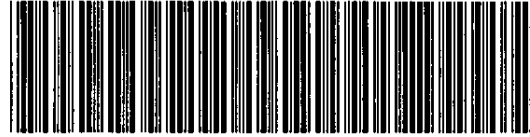
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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JAN 28 2016  
J. BRUCE

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Civic Financial Services, LLC**

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

**Steven Sheasby**

Name of Person

**Integrity Mortgage Licensing**

Firm/Company

**1168 Dorset Ln**

Address

**Costa Mesa, CA 92626**

City/State and Zip Code

**steven@imlicensing.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Steven Sheasby**

Name of Contact Person

at ( **714** ) **721-3963**

Area Code

Daytime Telephone Number

**MAILING ADDRESS:**

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☐ \$160.00 Filing Fee, Certificate  
of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A  
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. **Civic Financial Services, LLC**

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. **California**

(Jurisdiction under the law of which foreign limited liability company is organized)

3. **46-2477192**

(FEI number, if applicable)

4. \_\_\_\_\_

(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. **2015 Manhattan Beach Blvd. Ste 106**

**Redondo Beach, CA 90278**

(Street Address of Principal Office)

6. **2015 Manhattan Beach Blvd. Ste 106**

**Redondo Beach, CA 90278**

(Mailing Address)

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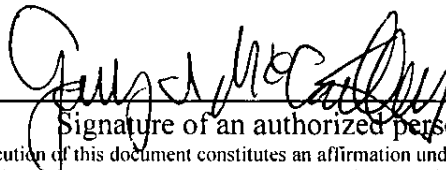
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

**Gary McCarthy, President, 2015 Manhattan Beach Blvd. Ste 106, Redondo Beach, CA 90278**

**James Helfrich, Vice President, 2015 Manhattan Beach Blvd. Ste 106, Redondo Beach, CA 90278**

**Matthew Miles, Vice President, 2015 Manhattan Beach Blvd. Ste 106, Redondo Beach, CA 90278**

8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

  
Signature of an authorized person

**SIGN HERE**

(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any 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.)

**Gary McCarthy**

Typed or printed name of signee

**STATE OF FLORIDA**

**REGISTERED AGENT CONSENT FORM**

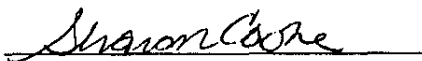
**DATE:** 1/21/2016

**ENTITY NAME:** Civic Financial Services, LLC

**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 Statutes.



Sharon Cooke, Assistant Secretary  
Paracorp Incorporated

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FILED

# State of California

## Secretary of State

### CERTIFICATE OF STATUS

**ENTITY NAME:** CIVIC FINANCIAL SERVICES, LLC

**FILE NUMBER:** 201534110326  
**FORMATION DATE:** 12/07/2015  
**TYPE:** DOMESTIC LIMITED LIABILITY COMPANY  
**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.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of December 23, 2015.

ALEX PADILLA  
Secretary of State