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| MISDUC | 006645 |
| (Requestor's Name) (Address) (Address) | 600315589216 |
| (City/State/Zip/Phone #) | 07/12/1801017028 ★★155.00 |
| (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: | |
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JUL 2 " 2018

COVER LETTER

Registration Section TO: **Division of Corporations**

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Quick Bridge Funding, LLC Name of Limited Lizbility Company SUBJECT:

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:



| Alanna | Cole | at (714) | 917 | 2-2659 |
|------------------------------------|---|------------------------------|-----------|--|
| Name o | of Contact Person | Area Code | Daytin | ne Telephone Number |
| MAILING ADDRESS: | | <u>sr</u> | REET A | ADDRESS: |
| Division of Corporations | Division of Corporations | | | |
| Registration Section | | Registration Section | | |
| P.O. Box 6327 | | Clifton Building | | |
| Tallahassee, FL 32314 | | 2661 Executive Center Circle | | |
| | | Ta | llahassee | , FL 32301 |
| Enclosed is a check for the follow | ring amount: | | | |
| □ \$125.00 Filing Fee | S130.00 Filing Fee & Certificate of Status | Certified Copy | | □ \$160.00 Filing Fee, Certificate of Status & Certified Copy |

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

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

| Callfor | nia 3 | | (FEI number, if applicable) |
|--|---|-------------|-----------------------------|
| irisdiction under the law of which | foreign limited liability company is organized) | | (FEI number, if applicable) |
| | (Date first transacted business in Florida, if prior to registratio | n 1 | |
| 5 m .4 | (See sections 605.0904 & 605.0905, F.S. to determine penalty | liability) | |
| 410 Exchan | nge <u>Svite 150</u> 6. | · | Same Mailing Address) |
| | 92002 | (| - or to |
| | | ··· | ES L T |
| | | | |
| | f Florida registered agent: (P.O. Box NOT | acceptable) | STAL D F |
| ame and street address o | | | rig o L |
| | | | |
| ame and <u>street address</u> o Name: | Becky Joly | | 1011 P. |
| | Becky Joly | | FLORIDI |
| Name: | Becky Joly 242 Whistling Run | Florida | 72.097. FLOREN |
| Name: | Becky Joly | , Florida | 32.092 (Zip code) |

| | (Registered agent's signature) | | | | | |
|----|---|---|--|-------------------|--|--|
| 8. | The name, title or capacity and <u>Title or Capacity</u> : | address of the person(s) who has/ha <u>Name and Address:</u> | ve authority to manage is/are: Title or Capacity: | Name and Address: | | |
| | President | Ben Guld 410 Exchange, Suiki50 10 ine, 09 92402 | | | | |
| | Vice President | Jason Osiecki 410 Exchange, Snite 150 Invine, CA 92602 | | | | |

(Use attachments if necessary)

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. 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.

| the Department of State constitutes a mird degree letony as provided for in \$.817.15. |
|--|
| |
| ya x |
| Signature of an authorized person |
| |
| |
| Alanna Cole |
| Typed or printed name of signee |

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

IN COMPLIANCE WITH SECTION 605,002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREGN TEMPTED LABILITY COMPANYTOTRANSACT BUSINESS INTHE STATE OF FLORIDA:

| () Start | a hyped for the purpose of transacting business | | | |
|---|---|-----------------------------|--------------------------|-----------------------|
| Califor thristener under the law of which | NY CAS foreign finited fability company is organized) | | elitt naudser, a | aterile, abilits |
| | | | | |
| · | | | | |
| | (Date first tracsacted business in Florada, if p (See sections (D) (500) & 668 (900), 1/5, 169 | determine penalty hability; | | |
| 410 Exchai | MC. Site 150 | 6 | Same Otaling Address | |
| | 1.1 | | (Multing Address) | |
| Invine CA | 92602 | <u> </u> | | |
| | | | | |
| | | | | هر |
| Name and street address c | of Florida registered agent; (P.O. | Box <u>NOT</u> acceptable | :) | - C2 - 00 |
| Name: | Becky Jay | | | E GR U |
| | • | | | |
| Office Address: | 242 Whistling | | | S 25 2 |
| _ | Sant Augustine | | -Iorida <u>32.09</u> | 2 199 - |
| | | | · Zip code) | |
| egistered agent's acceptat aving been named as regis | ice. tered agent and to accept servic | e of process for the al | hove stated limited liab | bility compare and |
| signated in this applicatio | n, Ukereby accept the appointm | ent as registered agen | t and agree to act in th | his capacity. Whithe |
| | s of all statutes relative to the pr | | rformance of my duti | es, and I am familiar |
| nd accept the obligations of | f my position as registered agen | | | |
| | - ALAA Hat | | | - - - |
| | V (Registerelt | gent's signature) | | |
| 8. The name, title or capacit | y and address of the person(s) w | ho has/have authority | to manage isfare: | |
| Title or Capacity: | Name and Address: | Title or Ca | | lame and Address: |
| President | Ben Gold | | | |
| | Ben Gold 411 Exchange, S Inine, CA 92102 | a12150 | | |
| | Inine, 09 92/102 | | - | |
| | | | | |
| Vice President | Josen CSiccki | | | |

(Use attachments if necessary)

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9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

HILLINCH ANGE SUITE 150 Invine CA 92002

Invine (A

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, 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 6.817 155, F.S.

| Lange C | ` | |
|---------------------|-------------------|--|
| Signature of an | authorized person | |
| Alanna (| C. IC. | |

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: QUICK BRIDGE FUNDING, LLC

FILE NUMBER: FORMATION DATE: TYPE: JURISDICTION: STATUS: 201108110184 03/21/2011 DOMESTIC LIMITED LIABILITY COMPANY CALIFORNIA 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 California this day of July 6, 2018.

ALEX PADILLA Secretary of State