

F05000000 789

2005 FEB -1 P 1:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

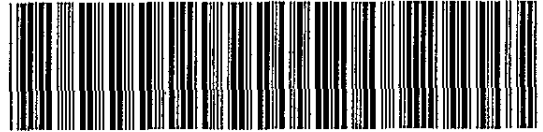
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300045702033

02/01/05--01033--001 **78.75

TRANSMITTAL LETTER

FILED

TO: Registration Section
Division of Corporations

2005 FEB -1 P 1:31

SUBJECT: ARGOSY MORTGAGE CORPORATION

(Name of corporation - must include suffix)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Lorie Baba

(Name of Person)

ARGOSY MORTGAGE CORPORATION

(Firm/Company)

1619 N. Brian Street, Suite A

(Address)

Orange, CA 92867

(City/State and Zip code)

For further information concerning this matter, please call:

Lorie Baba

(Name of Person)

at (714) 780-3935

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Registration 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

**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.*

FILED

2005 FEB -1 P 1:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. ARGOSY MORTGAGE CORPORATION

(Enter 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)

2. California

(State or country under the law of which it is incorporated)

3. 86-1070019

(FEI number, if applicable)

4. 6/17/2003

(Date of incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. None

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1619 N. Brian Street, Suite A, Orange, CA 92867

(Principal office address)

1619 N. Brian Street, Suite A, Orange, CA 92867

(Current mailing address)

8. Mortgage Broker

(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 NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

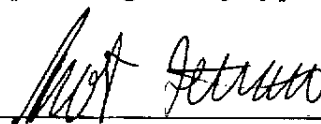
Plantation, Florida 33324

(City)

(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.


(Registered agent's signature)

Scot Ferraro
Assistant Secretary

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 business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Aaron M. Leffler

Address: 1619 N. Brian Street, Suite A, Orange, CA 92867

Director: _____

Address: _____

B. OFFICERS

President: Aaron M. Leffler

Address: 1619 N. Brian Street, Suite A, Orange, CA 92867

Vice President: _____

Address: _____


Secretary: Aaron M. Leffler

Address: 1619 N. Brian Street, Suite A, Orange, CA 92867

Treasurer: Aaron M. Leffler

Address: 1619 N. Brian Street, Suite A, Orange, CA 92867

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

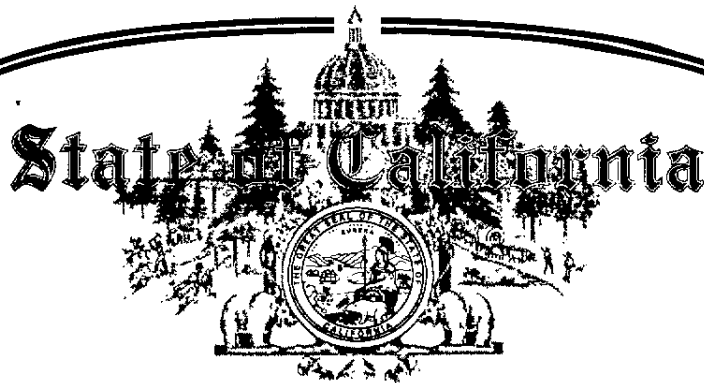
13.  January 31, 2005
(Signature of Director or Officer listed in number 12 of the application)

14. Aaron M. Leffler, President, Secretary & Treasurer / Director
(Typed or printed name and capacity of person signing application)

FILED

2005 FEB -1 P 1:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



SECRETARY OF STATE

CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, KEVIN SHELLEY, Secretary of State of the State of California, hereby certify:

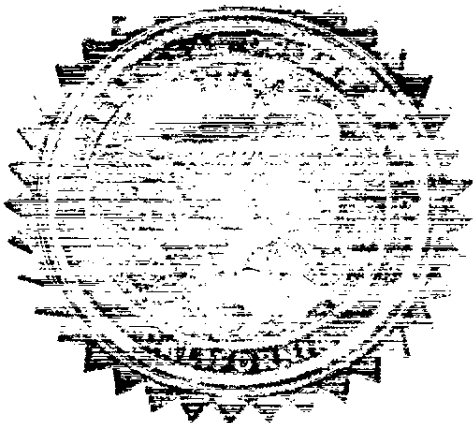
That on the **17th day of June, 2003**, **ARGOSY MORTGAGE CORPORATION** became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.

IN WITNESS WHEREOF, I execute this
certificate and affix the Great Seal
of the State of California this day
of January 26, 2005.



Kevin Shelley
KEVIN SHELLEY
Secretary of State

ts