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(Re	equestor's Name)	<u>. </u>
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phon	ne #)
PICK-UP	WAIT	MAIL
(Bı	ısiness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
L.	Office Use Or	nh.



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SECRETARY OF STATE

T. Burch SEP 1 4 2011

COVER LETTER

	ew Filing Section ivision of Corporations	
SUBJECT	T: Electronic Appraisal Solutions, Inc) .
OCBOLC:	Name of corporation - must incl	
Dear Sir or	r Madam:	
"Certificate	sed "Application by Foreign Corporation for Authorization of Existence," or "Certificate of Good Standing" and corrected foreign corporation to transact business in Florida	heck are submitted to register the
Plcase retu	urn all correspondence concerning this matter to the follo	wing:
Lynda S	Santana	
	Name of Person	
Electro	onic Appraisal Solutions, Inc.	
	Firm/Company	
1504 E	Eureka Road, Suite 310	
	Address	
Rosevil	lle, CA 95661	
	City/State and Zip code	
accounti	ting@valligent.com	
For further	E-mail address: (to be used for future an rinformation concerning this matter, please call:	nual report notification)
Lynda S	Santana at (916) 780-2	525 x235
		rtime Telephone Number
Ne Div Cli 266	ew Filing Section N ivision of Corporations D ifton Building P.	ew Filing Section ivision of Corporations O. Box 6327 allahassee, FL 32314
Enclosed is	s a check for the following amount:	
✓ \$70.00	Filing Fee \$\bigcup \frac{\$78.75 \text{ Filing Fee & Certificate of Status}}{\text{Certified 6}}	

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.

				
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"			F	
"Inc.," "Co.," "Corp." "Inc," "Co," or "Corp.")				Paul
				,
				ِيَّ جَاءِ آ
(If name unavail	able in Florida, enter alternate corporate na	ıme	adopted for the purpose of transacting business in	lorida).
<u>.</u> California		3.	01-0618450	
(State or country	under the law of which it is incorporated)	•	(FEI number, if applicable)	Ę.
4 01/17/2002		5.	Perpetual	,,,,,,
(Date of incorporation)			(Duration: Year corp. will cease to exist or Sperp	ctual")
6. <u>08/01/2011</u>				
	(Date first transacted busine	ss i	n Florida, if prior to registration)	
			502. F.S., to determine penalty liability)	
7 <u>, 1504 Eurek</u>	a Road, Suite 310, Rosevill	e,	CA 95661	
	(Principal office	add	ress)	
1504 Eure	ka Road, Suite 310, Rose	vil	le, CA 95661	
•	(Current mailing	add	rcss)	
Posidontia	I Real Estate Appraisals			
(Purpose(s) of corporation authorized in home state of	r cc	cuntry to be carried out in state of Florida)	
). Name and stree	<u>t address</u> of Florida regist ere d agent: (P.C). Box NOT acceptable)	
Name:	NRAI Services, Inc.			
Divide Address:	515 East Park Ave			
THE PROPERTY OF THE PROPERTY O				
	Tallahassee		, Florida 32301	
	(City)		(Zip code)	

10. Registered agent's acceptance:

Electronic Appraisal Solutions, Inc.

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.

Wendy D Rea, Assistant Secretary

(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.

2111 SEP 13 PH 1: 27

•12. Names and business addresses of officers and/or directors:	
A. DIRECTORS	
Chairman:	
Address:	
	••
Vice Chairman:	
Address:	7
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Director:	
Address:	
77	
Director:	
Address:	
B. OFFICERS	
President: Jeffrey Wickham	
Address: 1501 Deer Hollow Way, Roseville, CA 95661	
Vice President:	
Address:	
Audress.	
Secretary: Jeremy McCarty	
Address: 23840 Lakeview Ct, Auburn, CA 95602	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.	
Signature of Director or Officer	
The officer of director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes	а
third degree felony as provided for in s.817.155, F.S.	-
14. Jeffrey Wickham, President (Typed or printed name and capacity of person signing application)	
(Typed of printed name and capacity of person signing appreation)	

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

ELECTRONIC APPRAISAL SOLUTIONS, INC.

FILE NUMBER: FORMATION DATE: C2373736 01/17/2002

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, 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 August 29, 2011.

> **DEBRA BOWEN Secretary of State**

> > JCT