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FLORIDA/FOREIGN LIMITED LIABILITY CO.

AmeriFinancial Solutions, LLC

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November 27, 2007

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: AMERIFINANCIAL SOLUTIONS, LLC

REF: W07000057648

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Gina McLeod Regulatory Specialist II FAX Aud. #: H07000285702 Letter Number: 507A00067254

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: AmeriFinancial Solutions, 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 and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC."). 2. North Carolina (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 12-19-91 perpetual (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") 11-03-93 under previous corporate name "FirstCollect, Inc." ĸ (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 2828 Croasdaile Drive, Durham, NC 27705 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: Ann Vanderbilt, 100 Sparks Valley Rd, Suite D, Sparks, MD 21152 10. 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.) 11. Nature of business or purposes to be conducted or promoted in Florida: to carry on and continue the business of FirstCollect, Inc. Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penaltics of perjury that the facts stated herein are true.)

Typed or printed name of signee

Ann Vanderbilt, Manager

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

| 1. The name of | the Limited Liability Comp | pany is: | | |
|---|--|--|--|--------------|
| AmeriFinancial Sol | utions, LLC | | · | |
| If name unavaila | ble, the alternate name to b | pe used in the state of | of Florida is: | |
| 2. The name and | the Florida street address | of the registered ag | ent and office are: | |
| | СТ | Corporation System | | |
| • | | (Name) | | |
| | 1200 | South Pine Island Road | | |
| • | Florida Street Add | lress (P.O. Box <u>NOT</u> A | CCEPTABLE) | |
| _ | Plantation | FL | 33324 | |
| | | City/State/Zip | | |
| liability company agent and agree to relating to the pro obligations of my | at the place designated in the act in this capacity. I furthe performa | his certificate, I here her agree to comply nce of my duties, an | process for the above stated limit by accept the appointment as re with the provisions of all statute d I am familiar with and accept t Chapter 608, Florida Statutes. | gistere s |
| By: Daled | V. morris | | • . | |
| | (Signature) W. MORRIS I VICE PRESIDENT \$ 100.00 | | | |
| | 2 11K1 (B) | | | |
| * | \$ 25.00 | Filing Fee for Ap Designation of R | • | |



NORTH CAROLINA Department of The Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

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

AMERIFINANCIAL SOLUTIONS, LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 29th day of October, 2007, with its period of duration being Perpetual.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 15th day of November, 2007.

Secretary of State

Elaine I. Marshall

Certification# 87145267-1 Reference# 8805040- Page: 1 of 1 Verify this certificate online at www.secretary.state.nc.us/verification