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02/23/09---01021---020 **1S5.00

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: Summit Alliance beveraged Solutions, LLC (Name of Limited Liability Company)
(Name of Emined Elability 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:
Kristi Stevens
(Name of Person)
Summit Alliance Companies (Firm/Company)
(Firm/Company)
14785 Preston Rd, Suite 1000 (Address)
(Address)
Dallas, TV 75254 (City/State and Zip Code)
(Oily) State and Dip (Odd)
For further information concerning this matter, please call:
Kristi Stevens at (972) 888-1642 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\Begin{array}{cccccccccccccccccccccccccccccccccccc

CONSENT TO USE OF NAME

LEVERAGED SOLUTIONS, LLC a Florida limited liability company, hereby consents to the Florida foreign registration and use of a similar name by SUMMIT ALLIANCE LEVERAGED SOLUTIONS, LLC, a Texas limited liability company.

IN WITNESS WHEREOF, the officer or manager identified below has caused this consent to be executed this 30th day of January 2009.

LEVERAGED SOLUTIONS, LLC, a Florida limited liability company

Ву:__

Matthew D. Sanes, Manager



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 6, 2009

KRISTI STEVENS 14785 PRESTON ROAD, SUITE 1000 DALLAS, TX 75254

SUBJECT: SUMMIT ALLIANCE LEVERAGED SOLUTIONS, LLC

Ref. Number: W09000008823

We have received your document for SUMMIT ALLIANCE LEVERAGED SOLUTIONS, LLC and your check(s) totaling \$155.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

I am enclosing a sample copy of a Certificate from Texas.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Letter Number: 909A00006469

Neysa Culligan Regulatory Specialist II



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 24, 2009

KRISTI STEVENS 14785 PRESTON ROAD, SUITE 1000 DALLAS, TX 75254

SUBJECT: SUMMIT ALLIANCE LEVERAGED SOLUTIONS, LLC

Ref. Number: W09000008823

We have received your document for SUMMIT ALLIANCE LEVERAGED SOLUTIONS, LLC and your check(s) totaling \$155.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan Regulatory Specialist II

Letter Number: 909A00006469

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:	
1. Summit Alliance Lournaged Solutions, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
(Name of Poleigh Limited Elability Company, must include Elimited Elability Company, Elec., of Elec.)	
(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. PLYOS (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)	
2. ICAD 3. (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)	
$A \cap A$	
(Date of Organization) (Duration: Year limited liability company will cease to	
exist or "perpetual")	
6. <u>Na</u> 空间 R	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7. 14785 Preston Road Suite 1000 The 3	
Nallas, TX 15254 = 5	
(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:	
Charles H Spitzer 14785 Preston Rd, Suite 1000 Dallas, Tx 75	251
1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	حلا
Jim Bowman 14785 Preston Rd, Suite 1000 Pulles, TV 152	<i>3 </i>
Matthew D Sames 9966 NW9 Court Plantation, 71 33324	
The children cures The total Court I would lave It 55527	
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:	
$\overline{}$	
Individual late insurance.	
aulis HSpt_1	
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 penalties of perjury that the facts stated herein are true.)	
Charles H. Soitzer	
Typed or printed name of signee	
· · · · · · · · · · · · · · · · · · ·	

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 Company is:		
Summit alliance heveraged Solution	ins, LLC	
If name unavailable, the alternate name to be used in the state of Florida is:	•	
2. The name and the Florida street address of the registered agent and office are: CT Corporation System (Name) 1200 South Pinels Land Road Florida Street Address (P.O. Box NOT ACCEPTABLE) Plantation FL 33324 City/State/Zip	9 APR 14 AM 9: 51 SECRETARY OF STATE TALLAHASSEE FLORIDA	
опутонностр		

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Maria Ozaeta
(Signature)

Maria Ozaeta
Vice President

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

Hope Andrade Secretary of State

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



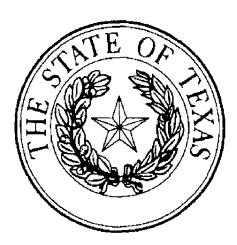
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Summit Alliance Leveraged Solutions, LLC (file number 801075465), a Domestic Limited Liability Company (LLC), was filed in this office on January 16, 2009.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on March 31, 2009.



Hope Andrade Secretary of State

X: (312) 463-3 TID: 10264 Dial: 7-1-1 for Relay Services Document: 252132320003