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EXAMINER



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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Hudson Finance, LLC	
(Name of Lin	nited Liability Company)
· · · · · · · · · · · · · · · · · · ·	ability Company for Authorization to Transact Business in submitted to register the above referenced foreign limited
Please return all correspondence concerning this	matter to the following:
Jeffrey S. Berenholz, Esq.	
(N	ame of Person)
Hudson Finance, LLC	
(F	irm/Company)
382 Blackbrook Road	
	(Address)
Painesville, OH 44077	
(City/S	tate and Zip Code)
For further information concerning this matter, pl	ease call:
Julie Hostetler	at (_440) 551-0353
(Name of Person)	(Area Code & Daytime Telephone Number)
MAILING ADDRESS:	STREET ADDRESS:
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: □ \$125.00 Filing Fee □ \$130.00 Filing Fee & Certificate of	

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 LIARII ITY COMPANY TO TRANSACT RUSINESS IN THE STATE OF FLORIDA:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	
1. Hudson Finance, LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LL	C.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a co consent of the managers or managing members adopting the alternate name. The alternate name must include "Limi Company," "L.L.C.," "LLC.")	
2. Delaware 3. 27-0997137	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
4. 9/24/2009 5. Perpetual	
(Date of Organization) (Duration: Year limited liability company will exist or "perpetual")	cease to
6. N/A	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7 382 Blackbrook Road	SEC VISIO
Painesville, OH 44077	CT -
(Street Address of Principal Office)	_
8. If limited liability company is a manager-managed company, check here	TOR POR
9. The name and usual business addresses of the managing members or managers are as follows	ATION
D. Scott Clarke - 382 Blackbrook Road, Painesville, OH 44077	
Mark Finston - 382 Blackbrook Road, Painesville, OH 44077	
Jeffrey S. Berenholz, Esq 382 Blackbrook Road, Painesville, OH 44077	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having cus the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign lar 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: Debt purchasing	and
debt collection.	
Signature of a member of 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.)	
Jethray S. Berenholz	
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 I	liability Company is:	
Hudson Finance, 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:	
Corporatio	n Service Company	
	(Name)	
1201 Hays	Street	
F	lorida Street Address (P.O. Box NOT ACCEPTABLE)	
Tallahasse	e _{FL} 32301	
	City/State/Zip	
liability company at the place agent and agree to act in this of relating to the proper and con obligations of my position as r	red agent and to accept service of process for the above stated limited designated in this certificate, I hereby accept the appointment as registered capacity. I further agree to comply with the provisions of all statutes plete performance of my duties, and I am familiar with and accept the egistered agent as provided for in Chapter 608, Florida Statutes.	
Corporation Service Cor BY: (Signature)	Sue G. Knight as its agent	
	\$ 100.00 Filing Fee for Application	

\$ 25.00 Designation of Registered Agent
 \$ 30.00 Certifled Copy (optional)
 \$ 5.00 Certificate of Status (optional)

-

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "HUDSON FINANCE, LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING

AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE

SHOW, AS OF THE SECOND DAY OF OCTOBER, A.D. 2009.

4734559 8300

090905865

AUTHENTY CATION: 7563003

DATE: 10-02-09

You may verify this certificate online at corp.delaware.gov/authver.shtml