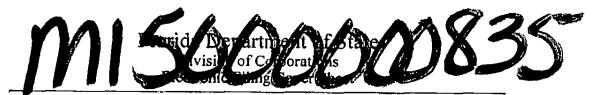
Division of Corporations

Page 1 of 1



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H150000268123)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. To

Email Address:

Foreign Limited Liability Company RTO Finance LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

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FEB 0 3 2015), BRUCE _____

Enclosed is a check for the following amount:

© \$125.00 Filing Fee Certificate of Status

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: RTO Finance LLC			
30B3EC1:	e of Limited Liability Company	-	
	cility Company for Authorization to Transact Business in Florida bove referenced foreign limited liability company to transact bu		
Please return all correspondence concerning this ma	uter to the following:		
Jenn Andrews			
	Name of Person	-	
RTO Finance L	LC		
	Firm/Company	_	
PO Box 9789		_	
	Address	_	
Greenville, SC	29604		
	City/State and Zip Code		201
jennandrews@r			2015 FEB
E-mail address:	(to be used for future annual report notification)	- <u>교</u> 리	89
For further information concerning this matter, pleas	se call:	3SE A	-2
Jenn Andrews	at 864 326-4091		AM IQ: 3
Name of Contact Person	Area Code Daytime Telephone Number	9RI 9RI	<u> </u>
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	PLORIDA FLORIDA	ω

☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate
Certified Copy of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Liability Company," "L.L.C," or "L.L.C.")	for the purpose of transacting business in Florida. The alternate name r	nust include "Limited
2. SC (Jurisdiction under the law of which foreign limits	3. 47-1108647	
company is organized)	ted liability (FEI number, if applicable)	
4. (Date first tran	nsacted business in Florida, if prior to registration.) 5.0904 & 605.0905, F.S. to determine penalty Hability)	
5. 104 Mauldin Rd Ste I	described and the second secon	
Greenville, SC 29604		2018 AL
6. PO Box 9789	(Street Address of Principal Office)	AND TO
Greenville, SC 29604		358 438 438 438 438 438 438 438 438 438 43
• •	(Mailing Address) ress of the person(s) who has/have authority to managuldin Rd., Ste I, Greenville, SC 29604	AH IO: 31
		<u> </u>

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

lf unavailal	ble, the alternate to be used in the state of F	forida is:	
2. The nan	ne and the Florida street address of the regis	stered agent and office are:	SICHE ALLAN
	NRAI Services, Inc.		
	(Name)		BASE O AB
	1200 South Pine Island Road		-n -= -
	Florida Succe Address (P.O. B	DX NOT ACCEPTABLE)	STATE LORIDA
	Plantation p	1 33324	⊅m <u> </u>
	Flantation F	 	

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 Chapten 605. Elacida.

Statutes.

Asst. Secretary

(Signature)

S 100.00 Filing Fee for Application

S 25.00 Designation of Registered Agent

S 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

RTO FINANCE LLC, A Limited Liability Company duly organized under the laws of the State of South Carolina on June 12th, 2014, with a duration that is until June 12th, 2064, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to section 33-44-809 of the South Carolina Code, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 2nd day of February, 2015.

Mark Hammond, Secretary of State