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SECRELYSSEE, PLORIDA

18 AUG 30 REIO: 3

K. SALY AUG 3 1 2018 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 367558 7670338

AUTHORIZATION :

COST LIMIT : \$185.00

ORDER DATE : August 29, 2018

**\_** 

ORDER TIME : 9:52 AM

ORDER NO. : 367558-005

CUSTOMER NO: 7670338

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## FOREIGN FILINGS

NAME: RAPID AUTO LOANS OF MISSISSIPPI, LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

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

IN COMPLIANCE WITH SECTION (US.0902, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIMITED LIMITAD. COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Rapid Auto Loans of Mississippi, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If have unweighble, even electronic terms adopted for the purpose of transacting business in Florida. The alternate name roust include "Limited Liability Company." "LLC," or "LLC") 2 Delaware (haradiction under the law of which foreign lensted larbeitry company is organized) 6. 911 East Atlantic Blvd. 911 East Atlantic Blvd. (Street Address of Principal Office) Suite 101 Suite 101 Pompano Beach, Florida 33060 Pompano Beach, Florida 33060 7. Name and street address of Florida registered agent. (P.O. Box. NOT acceptable) Jonathan D. Louis, P.A. 7777 Glades Road Suite 315-B Office Address: , Florida <u>3343</u>4 Boca Raton (Civ) Registered agent's acceptance: Having heen named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to uci 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. /s/ Jonathan D. Louis, P.A. (Registand agon's rigosture) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Title or Capacity: Name and Address: Name and Address: Title or Capacity: MGR Victoria Gerard ? MGR 911 East Atlantic BLVD. Suite 101 Pompage 33060 (Use attachments if necessary) 9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, I am aware that any false information

Typed or privated names of Highest

submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Victoria Gerardi, Manager

of the translator must be submitted)

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "RAPID AUTO LOANS OF MISSISSIPPI, 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 TWENTY-NINTH DAY OF AUGUST, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RAPID AUTO LOANS OF MISSISSIPPI, LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF AUGUST,

A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

18 AUG 30 AM 12: 20
SECNELASSEE, FLORIDA



Authentication: 203331639

Date: 08-29-18

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