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SECRETARY OF STATE OF DIVISION OF CORPORATIONS

05/16/07--01002--014 **155.00

COVER LETTER

	Registration Section Division of Corporations		
SUBJE		Limited Liability Company)	
Florida,		I Liability Company for Authorization to Transa re submitted to register the above referenced for da	
Please r	eturn all correspondence concerning th	nis matter to the following:	DIVISION SEC
	Patricia Dunn		A SECTION
		(Name of Person)	- 5 TEST
	MuniServices, LLC	·	SECRETARY OF STATIONS INTSION OF CORPORATIONS O7 HAY 16 PM 3: 47
		(Firm/Company)	_ 5 %
	7335 N. Palm Bluffs Ave) .	
		(Address)	
	Fresno, CA 93711		_
	(Cit	y/State and Zip Code)	
For furt	her information concerning this matter	, please call:	
	Patricia Dunn	at (559) 271-6852	
-	(Name of Person)	(Area Code & Daytime Telephone Nur	nber)
]]	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	
	d is a check for the following amount: ☐\$125.00 Filing Fee ☐\$130.00 Filing Fe Certifica		e, Certificate & Certified Copy

MuniServices, LLC. 7335 North Palm Bluffs Avenue Fresno, California 93711 Phone: 800.800.8181 Fax: 559.275.0171 www.MuniServices.com

May 9, 2007

Susan Payne, Senior Section Administrator Amendment Section Division of Corporations Clifton Building . 2661 Executive Center Circle Tallahassee, FL 32301

RE: Withdrawal of MBIA MuniServices Company and Registration of MuniServices, LLC

Dear Ms. Payne:

Recently, MBIA MuniServices Company (F01000006233) converted under Delaware law from a corporation to a limited liability company. In December 2006, MuniServices filed an amendment to reflect the change of corporate structure, but the filing was returned. (See letter number 206A00070539 enclosed.)

Attached to this letter are the required filing forms and fees. Please apply the check mailed in December 2006 totaling \$43.75 to the filing fee for withdrawal and a certified copy of the withdrawal. A check for \$155.00 is included for the foreign limited liability company registration fees.

If you have any questions, please contact Eric Myers, at 559-271-6878 or email at legal@muniservices.com. Please send the certified copies to the address above.

Thank you for your consideration,

Sincerely,

Devin Wagstaff
Legal Assistant

MuniServices, LLC

SECRETARY OF STATE
DIVISION OF CORPORATION

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. MuniS	ervices, LLC	
	(Name of Foreign Limited Liability Company)	
2. Delawa	јге	
(Jurisdic company	ion under the law of which foreign limited liability (FEI number, if applicable) is organized)	
07-26		
	(Date of Organization) (Duration: Year limited liability company will ce exist or "perpetual")	ase to
5. <u>11-01</u>	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	* * * _c
7. <u>7335</u>	N. Palm Bluffs Ave	
Fresn	o, CA 93711	07
	(Street Address of Principal Office)	E C
. If limi	ted liability company is a manager-managed company, check here	07 HAY 16 PH 3: 4
The na	ame and usual business addresses of the managing members or managers are as follows:	PM
Munis	Services Holdings, LLC	(16 PM 3: 4)
7335	N. Palm Bluffs Ave	
Fresr	no, CA 93711	
ne jurisdicti	d is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custoc on under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign langu- of the certificate under oath of the translator must be submitted.)	
1. Natu	re of business or purposes to be conducted or promoted in Florida:	
Any la	awful business or activity under the law in this state.	
	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.)	
	Kevin Cerutti, CFO	
	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 MuniService	of the Limited Liability Co ces, LLC	mpany is:	
2. The name a	and the Florida street addre	ess of the registered agent and office are:	
	CT Corporation Syste	em	
		(Name)	0 P
	1200 South Pine Island Road		O7 MAY
	Florida Street A	Address (P.O. Box <u>NOT</u> ACCEPTABLE)	7 6
	Plantation	FL 33324	PM
City/State/Zip			3: 4:1
			3: 47

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.

Janet Gerkin Special Asst. Secretary

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

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "MUNISERVICES 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 THIRD DAY OF MAY, A.D. 2007.

SECRE TARY OF STATE
DIVISION OF CORPORATIONS
OT MAY 16 PM 3: 47



Warriet Smith Windsor, Secretary of State

AUTHENTICATION: 5648502

DATE: 05-03-07

2203158 8300

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