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SECRETARY OF STATIONS OF COSTATIONS

COVER LETTER

Division of Corporations		
SUBJECT: Colonial Credit, LLC		
(Name of Limit	ited Liability Company)	
- · · · · · · · · · · · · · · · · · · ·	bility Company for Authorization to Transact Business in bmitted to register the above referenced foreign limited	
Please return all correspondence concerning this m	atter to the following:	
Stephen Johnson		
(Na	me of Person)	
Colonial Credit, LLC		
(Fir	m/Company)	
207 Quaker Lane		
	(Address)	
West Warwick, RI 02893		
(City/Sta	ate and Zip Code)	
For further information concerning this matter, ple	ase call:	
Stephen Johnson	at (_401) 615-1921 x27	
(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:	□\$155.00 Filing Fee & □\$160.00 Filing Fee, Certificate Status Certified Copy of Status & Certified Copy	

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.	Colonial Credit, LLC
	(Name of Foreign Limited Liability Company)
2.	hode Island 3, 20-0075832
	urisdiction under the law of which foreign limited liability (FEI number, if applicable) mpany is organized)
4.	07/03 _{5.} Perpetual
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6.	07/05
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7.	207 Quaker Lane, West Warwick, RI 02893
	97 J
	(Street Address of Principal Office)
8.	f 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:
the	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in a roreign language, a lation of the certificate under oath of the translator must be submitted.)
urai	ilation of the certificate under oath of the translator must be submitted.)
11	Nature of business or purposes to be conducted or promoted in Florida: Originate mortgage loans
	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.)
	Stephen Johnson
	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.

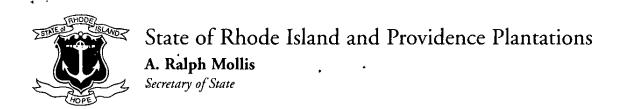
1. The name of	the Limited Liability Company is:	•
Colonial Credit, L	LLC	
2. The name and	d the Florida street address of the registered agent and office are:	
	NRAI Services, Inc.	
	(Name)	•
	2731 Executive Park Drive, Suite 4	_
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	•
_	Weston FL 33331	_
	City/State/Zip	,

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. NRAI Services, Inc.

By: Christ Sha 614/2007
(Signature)

Christian Eubanks - 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)



The Office of the Secretary of State of the State of Rhode Island and Providence Plantations, HEREBY CERTIFIES, that

Colonial Credit, LLC

a Rhode Island limited liability company, filed articles of organization in this office on the 7^{th} day of July, 2003; and

IT IS FURTHER CERTIFIED that as of this date said limited liability company is duly organized and existing under and by virtue of the laws of the State of Rhode Island and is in good standing according to the records of this office.

SIGNED AND SEALED this first day of June, A.D. 2007.

Secretary of State

BPllus Intonelli

