

Division of Corp				ě
SUBJECT: Ne	elnet Loan Services	- Inc.		
		n - must include suffix)	· · · · ·	-
Dear Sir or Madam:				
	on by Foreign Corporation for a control of the cont			
Please return all corresp	ondence concerning this matter	to the following:		
William J	. Munn, Senior Cou (Name of			-
Nelnet Co	rporation		00051135 93/19/92 91	5 934
	(Firm/Cor	npany)	****325.00	*****70.00
3015 S. F	arker Road, Suite			-
	(Addre	ess)	FOZ-1	665
Aurora, C		nd Zip code)		-
	(01.5), 2 (2.2)		FOZ-180	2/
For further information	concerning this matter, please c	all:		
			22	======================================
William J. Mun	at (<u>303</u>) 696-5405	AP R	SCA
William J. Munn at (303) 696-5405 (Name of Person) (Area Code & Daytime Telephone Number)				
STREET ADDRESS:		MAILING ADDRESS:	PH 12: 2	ORA
Registration Section	•	Registration Section	2	
Division of Corporations 409 E. Gaines St.	•	Division of Corporations P.O. Box 6327		2 Z
Tallahassee, FL 32399		Tallahassee, FL 32314		
Enclosed is a check for t	he following amount:			7
23 \$70.00 Filing Fee	☐ \$78.75 Filing Fee & ☐ Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status Certified Copy	&



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 20, 2002

WILLIAM J. MUNN, SENIOR COUNSEL NELNET CORPORATION 3015 S. PARKER ROAD, SUITE 400 AURORA, CO 80014

SUBJECT: NELNET LOAN SERVICES, INC.

Ref. Number: W02000007801

We have received your document for NELNET LOAN SERVICES, INC. and your check(s) totaling \$325.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

A certificate of existence or a certificate of good standing, dated no more than 90° days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers
Document Specialist

Letter Number: 302A00016733



April 3, 2002

Mr. Lee Rivers
Document Specialist
Secretary of State
Division of Corporations, Registration Section
P.O. Box 6327
Tallahassee, FL 32314

Re: Letter Number 302A00016733, Application by Foreign Corporation for Authorization to Transact Business in Florida, Nelnet Loan Services, Inc.

Dear Mr. Rivers:

Enclosed is an Application by Foreign Corporation for Authorization to Transact Business in Florida with the original signatures of Edward P. Martinez, along with the original Nebraska Certificate of Good Standing requested by your office.

Also enclosed are copies of the following items:

- Return letter from your office, dated March 20, 2002
- My original cover letter to your office, dated March 15, 2002
- Nelnet check number 0935215 in the amount of \$325.00 that covers the feefor this Application

Feel free to contact me if I may be of any further assistance in this matter.

Sincerely,

Peggy Lynch Legal Assistant

Enclosures (5)

By: UPS Next Day Air, Airbill #5677 1628

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

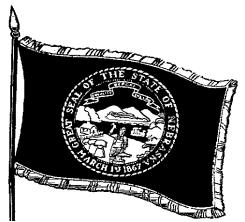
1.	Nelnet Loan Services, Inc.					
	(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or					
	words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a					
	natural person or partnership if not so contained in the name at present.)					
_	0// 17/19017					
2.	Nebraska 3. 84-0748903 (State or country under the law of which it is incorporated) (FEI number, if applicable)					
4.	(Date of incorporation) 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")					
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")					
ο.	<u>Upon qualification</u> (Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")					
	(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)					
7.	6420 Southpoint Parkway Jacksonville, FL 32216					
	(Principal office address)					
	6420 Southpoint Parkway Jacksonville, FL 32216					
	(Current mailing address)					
	9. 9.	<u> </u>				
0		51.12 50.1				
٥.	Purpose(c) of corporation authorized in home state or country to be corried out in state of Florida)	≅ ≘				
	(x arpose(s) of corporation authorized in nonic state of country to be carried out in state of Florida)	2				
9.	To transact any lawful business (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Name: Edward P. Martinez c/o Human Resources Fice Address: 6420 Southpoint Parkway	27.				
		9				
	Name: <u>Edward P. Martinez c/o Huma</u> n Resources	<u>S</u>				
_	~ 11	ATE				
O1	fice Address: 6420 Southpoint Parkway - 2	•				
	Tacksonwille Florida 22216					
	<u>Jacksonville</u> , Florida <u>32216</u> (City) (Zip code)					
	(Oily) (Zip oode)					
10	. Registered agent's acceptance:					
H	iving been named as registered agent and to accept service of process for the above stated corporation at the pl	lace				
de.	signated in this application, I hereby accept the appointment as registered agent and agree to act in this capaci	ity. I				
fui	rther agree to comply with the provisions of all statutes relative to the proper and complete performance of my					
dи	ties, and I am familiar with and accept the obligations of my position as registered agent.					
	There I. Melder					
	(Registered agent's signature)					

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Michael S. Dunlap Address: 6801 S. 27th Street Lincoln, NE 68512 Vice Chairman: Address: __ Director: _ Address: Director: _ Address: B. OFFICERS President: Michael S. Dunlap Address: 6801 S. 27th Street Lincoln, NE 68512 Vice President: Secretary: Edward P. Martinez Address: 6420 Southpoint Parkway Jacksonville, FL 32216 Treasurer: Address: ___ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, ox any officer listed in number 12 of the application) 14. ___Edward P. Martinez, Secretary

(Typed or printed name and capacity of person signing application)

STATE OF



NEBRASKA

United States of America, State of Nebraska

ss.

Department of State Lincoln, Nebraska

I, John A. Gale, Secretary of State of Nebraska do hereby certify;

NELNET LOAN SERVICES, INC.

was duly incorporated under the laws of this state on December 21, 1977 and do further certify that no occupation taxes assessed are unpaid and no annual reports are delinquent; articles of dissolution have not been filed and said corporation is in existence as of the date of this certificate.

In Testimony Whereof,

I have hereunto set my hand and affixed the Great Seal of the State of Nebraska on January 16, in the year of our Lord, two thousand

two.

SECRETARY OF STATE

02 APR -4 PH 12: 2

DIVISION OF CORPORATIONS