

# F11000000142

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**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.

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To:

Division of Corporations  
Fax Number : (850) 617-6381

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5368

*Please file 2nd  
after  
H10000277724*

*Thanks!*

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

Email Address: \_\_\_\_\_

**\*RE-SUBMIT\***

*Please retain original filing  
date of submission 12/29*

**FOREIGN PROFIT/NONPROFIT CORPORATION**  
OneMain Financial, Inc.

Certificate of Status	1
Certified Copy	1
Page Count	98
Estimated Charge	\$87.50

Electronic Filing Menu

Corporate Filing Menu

Help

FILED  
10 DEC 29 PM 1:57  
TALLAHASSEE, FLORIDA  
DEPARTMENT OF STATE

*PS 1/12/11*



January 3, 2011

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: ONE MAIN FINANCIAL, INC.  
REF: W11000000024

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch  
Regulatory Specialist II

FAX Aud. #: H10000277729  
Letter Number: 211A00000020



December 30, 2010

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: ONEMAIN FINANCIAL, INC.  
REF: W10000059849

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

The document number of the name conflict is P10000082046 (ONEMAIN FINANCIAL, INC.).

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch  
Regulatory Specialist II

FAX Aud. #: H10000277729  
Letter Number: 910A00030153

MEESHIM, INC.  
914 Rappaix Court  
Towson, MD 21286  
January 11, 2011

Florida Department of State  
Division of Commerce  
P. O. Box 6327  
Tallahassee, FL 32314

Re: ONEMAIN FINANCIAL, INC.  
Florida Document Number P10000082046

Ladies and Gentlemen:

I am the incorporator of OneMain Financial, Inc. pursuant to Articles of Incorporation filed with your office on October 7, 2010 and assigned document number P10000082046.

OneMain Financial, Inc. never began to do business and I have initiated the process to dissolve OneMain Financial, Inc. I have no intention of revoking the dissolution of OneMain Financial, Inc.

I wish to release the name "OneMain Financial, Inc." to CitiFinancial Credit Company acting through its agent, CT Corporation, in order that OneMain Financial, Inc., a Delaware corporation, may be qualified as a foreign corporation in Florida.

Please feel free to contact me with any questions at 410-332-2980 or [davisl@citi.com](mailto:davisl@citi.com).

Very truly yours,

  
Linda S. Davis

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** OneMain Financial, Inc.  
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State and Zip code

\_\_\_\_\_  
terri.baer@citi.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

\_\_\_\_\_  
Name of Person

at (\_\_\_\_\_) \_\_\_\_\_

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$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

**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. OneMain Financial, Inc.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

**2. Delaware**

(State or country under the law of which it is incorporated)

**3. 27-4318010**

(PEI number, if applicable)

**4. 12/15/2010**

(Date of incorporation)

**5. Perpetual**

(Duration: Year corp. will cease to exist or "perpetual")

**6. Upon Qualification**

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

**7. 300 St. Paul Place, Baltimore, DE 21202**

(Principal office address)

same

(Current mailing address)

**8. Consumer Finance Company**

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

**9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)**

Name: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

Florida 33324

(Zip code)

**10. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 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.*

CT Corporation System

By: Kathleen A. Whelan, Asst. Secretary

(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.**

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10 DEC 29 PM 1:57  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: SEE ATTACHMENT

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: SEE ATTACHMENT

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. \_\_\_\_\_

Teresa M. Baer  
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. \_\_\_\_\_

Teresa M. Baer, Asst. Secretary

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

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10 DEC 28 PM 1:57  
DEPARTMENT OF STATE  
1211 MARSHALL BLVD  
WASHINGTON, D.C. 20520

**OneMain Financial, Inc.**  
(a Delaware Corporation)

100% of stock is owned by CitiFinancial Credit Company (a Delaware corporation)

CitiFinancial, Inc. is wholly owned and receives all of its  
funding directly from the parent corporation (CitiFinancial Credit Company)

**DIRECTORS:**

James W. Schneider	300 St. Paul Place	Baltimore, MD 21202
Gregory Lechner	300 St. Paul Place	Baltimore, MD 21202
Linda Davis	300 St. Paul Place	Baltimore, MD 21202

**OFFICERS:**

<b>President</b>		
James W. Schneider	300 St. Paul Place	Baltimore, MD 21202

<b>Treasurer</b>		
Gregory Lechner	300 St. Paul Place	Baltimore, MD 21202

<b>Vice President/Secretary</b>		
Linda S. Davis	300 St. Paul Place	Baltimore, MD 21202

<b>Assistant Secretary</b>		
Teresa M. Baer	300 St. Paul Place	Baltimore, MD 21202

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ONEMAIN FINANCIAL, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-NINTH DAY OF DECEMBER, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

FILED  
10 DEC 29 PM 1:57  
SECRETARY OF STATE  
DELAWARE

4880327 8300

101243017

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 8458068

DATE: 12-29-10