

Division of Corporations
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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : C T CORPORATION SYSTEM
Account Number : PCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

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

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION

Springleaf Financial Services of Arizona, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

<https://efile.sunbiz.org/scripts/efilcovr.exe>

Handwritten signature and date 7/3/12

7/2/2012

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12 JUL -2 PM 2:03
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JUL -2 AM 10:39

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Springleaf Financial Services of Arizona, 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:

Linda K. Jones

Name of Person

Springleaf Finance, Inc.

Firm/Company

601 NW Second Street

Address

Evansville IN 47708

City/State and Zip code

tim.blythe@slfs.com

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

For further information concerning this matter, please call:

Linda Jones

at (812) 468-5067

Name of Person

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

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**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. Springleaf Financial Services of Arizona, 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. Arizona 3. 35-1071736
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 03/08/1962 5. Perpetual
(Date of incorporation) (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. 601 NW Second Street, Evansville, IN 47708
(Principal office address)

same
(Current mailing address)

8. To assist affiliated entities with lending operations.
(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: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(City) (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.

C T Corporation System

By: Bull

(Registered agent's signature)

Bernadette McNamara
Assistant Secretary

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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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. 

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. Michael L. McClellan, President

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

Directors/Principal Officers Report

As of June 28, 2012

Springleaf Financial Services of Arizona, Inc.

Directors

Donald Ray Breivogel, Jr.

Director

Primary Address

601 NW Second Street

Evansville, Indiana 47708 (United States)

Michael Lee McClellan

Director

Primary Address

601 NW Second Street

Evansville, Indiana 47708 (United States)

George D. Roach

Director

Primary Address

601 NW Second Street

Evansville, Indiana 47708 (United States)

Officers

Michael Lee McClellan

President

Primary Address

601 NW Second Street

Evansville, Indiana 47708 (United States)

Donald Ray Breivogel, Jr.

Chief Financial Officer and Senior Vice President

Primary Address

601 NW Second Street

Evansville, Indiana 47708 (United States)

Bradford Dale Borchers

Executive Vice President

Primary Address

601 NW Second Street

Evansville, Indiana 47708 (United States)

Jack Richard Erkill

Senior Vice President, General Counsel and Secretary

Primary Address

601 NW Second Street

Evansville, Indiana 47708 (United States)

Bryan A. Binyon

Vice President and Treasurer

Primary Address

601 NW Second Street

Evansville, Indiana 47708 (United States)

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STATE OF ARIZONA



Office of the
CORPORATION COMMISSION
CERTIFICATE OF GOOD STANDING

To all to whom these presents shall come, greeting:

I, Ernest G. Johnson, Executive Director of the Arizona Corporation Commission, do hereby certify that

*****SPRINGLEAF FINANCIAL SERVICES OF ARIZONA, INC.*****

a domestic corporation organized under the laws of the State of Arizona, did incorporate on March 8, 1962.

I further certify that according to the records of the Arizona Corporation Commission, as of the date set forth hereunder, the said corporation is not administratively dissolved for failure to comply with the provisions of the Arizona Business Corporation Act; and that its most recent Annual Report, subject to the provisions of A.R.S. sections 10-122, 10-123, 10-125 & 10-1622, has been delivered to the Arizona Corporation Commission for filing; and that the said corporation has not filed Articles of Dissolution as of the date of this certificate.

This certificate relates only to the legal existence of the above named entity as of the date issued. This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's condition or business activities and practices.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of the Arizona Corporation Commission. Done at Phoenix, the Capital, this 28th Day of June, 2012, A. D.



Executive Director

By: 781132

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