(Requestor's Name) (Address) (Address)	000023472270
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number)	FILED 03 OCT IS PN 2 50 SUBJOLE FLOREA
es Certificates of Status nuctions to Filing Officer:	RECEIVED 03 OCT 15 AN II: 05 DIVISION OF CORPORATION

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CORPORATION SERVICE COMPANY"

ACCOUNT NO. : 07210000032		
REFERENCE : 280159 7332885		
AUTHORIZATION : Paricia Pinits E 3 1		
COST LIMIT : \$ 125.00		
ORDER DATE : October 14, 2003		
ORDER TIME : 9:22 AM		
ORDER NO. : 280159-005		
CUSTOMER NO: 7332885		
CUSTOMER: Ms. Teresa Weigand Dadata, Inc.		
Suite 550 26750 Us Highway 19 North Clearwater, FL 33761		
DOMESTIC FILING		
NAME: CENTRA CONSUMER FINANCE, LLC		
EFFECTIVE DATE:		
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION		
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:		
CERTIFIED_COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING		

CONTACT PERSON: Amanda Haddan - EXT. 1155 EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR LIMITED LIABILITY COMPANY

ARTICLE I – Name:

The Name of the Limited Liability Company is: Centra Consumer Finance, LLC.

ARTICLE II – Address:

The mailing address and street address of the principle office of the Limited Liability Company is: 26750 US Hwy 19 N, Suite 550, Clearwater, FL 33761

ARTICLE II - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida Street address of the registered agent are:

<u>Scott A. Lucas</u> <u>934 Skye Lane</u> Palm Harbor, FL <u>34683</u>

Having been named as the 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 statues relating to the proper and complete performance of my duties, and I am familiar with and accept all the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature

(an additional article must be added if an effective date is requested)

Signature of a member or an authorized representative of a member .

In accordance with section 608.408(3), Florida Statutes, the execution Of this document constitutes and affirmation under the penaltics of perjury That the facts stated herein are true.

Scott A. Lucas

Typed or printed name of signce

Filing Fees: \$100.00 Filing Fee for Articles of Organization \$ 25.00 Designated of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certified of Status (Optional)