

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

11 JUL 14 AM 11:02

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L07000029867

1. Limited Liability Company's Name

Manhattan Finance Company, LLC

600209381796
07/14/11--01015--012 **541.25

CR2E041 (1/11)

2. Principal Office Address - No P.O. Box #
3520 Kraft Road

Suite, Apt. #, etc.

3. Mailing Office Address
3520 Kraft Road

Suite, Apt. #, etc.

City & State

Naples, Florida

City & State

Naples, Florida

Zip

34105

Country

U.S.

Zip

34105

Country

U.S.

4. State/Country of Formation
Florida

5. Date Organized or Qualified
To Do Business in Florida **03/19/2007**

6. FEI Number
02-0644165

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☒ \$5.00 Additional Fee required
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name **Kevin P. Moore**

Street Address (P.O. Box Number Is Not Acceptable)
3520 Kraft Road

Suite, Apt. #, Etc.

City

Naples

State

FL

Zip Code

34105

E-mail Address:

kpmoore@rooneyholdings.com
(To be used for future annual report notices)

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of
Registered Agent

Date **6/30/2011**

REGISTERED AGENT MUST SIGN

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGR	Kevin P. Moore	3520 Kraft Road	Naples, FL 34105
MGR	Francis Rooney	3520 Kraft Road	Naples, FL 34105

REINSTATEMENT 2009-2011

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in Chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.165, F.S.

Signature of Managing
Member/Manager

Date **06/30/2011**

Daytime Phone # **(239) 643-6000**

Typed or printed name of signing Managing Member/Manager **Kevin P. Moore, Manager**

McAFEE & TAFT

A PROFESSIONAL CORPORATION

10TH FLOOR • TWO LEADERSHIP SQUARE
211 NORTH ROBINSON • OKLAHOMA CITY, OK 73102-7103
(405) 235-9621 • FAX (405) 235-0439
www.mcafeetaft.com

WRITER DIRECT
(405) 552-2362
FAX (405) 235-0439
jane.henson@mcafeetaft.com

July 13, 2011

FEDERAL EXPRESS

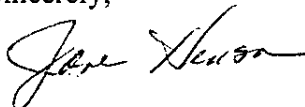
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Ladies and Gentlemen:

Enclosed for filing (two copies of each provided) are: 1) Limited Liability Company Reinstatement on Manhattan Finance Company, LLC (FL Doc #L07000029867); and 2) Articles of Amendment to Articles of Organization of Manhattan Finance Company, LLC changing its name to Manhattan Group Finance Company, LLC. Also enclosed is our check #097844 in the amount of \$541.25 in payment of all filing fees and a prepaid Federal Express envelope for return of filing evidence.

Thank you for your assistance. If you have questions about the filing please give me a call at 405/552-2362.

Sincerely,



Jane E. Henson-Martin
Legal Assistant

Enclosures