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-01/16/02--01036--012
*****125.00 *****125.00

January 10, 2002

Florida Department of State
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

700004777857--9
-01/16/02--01036--013
*****35.00 *****35.00

Attn: Qualification and Tax Liens

Re: Foreign LLC Filing/Resident Agent Designation

Dear Sir/Madam:

I have enclosed the following items required for a foreign LLC to transact business in Florida:

1. Application by Foreign LLC for Authorization to Transact Business in Florida
2. Certificate of Good Standing - State of Connecticut
3. Designation of Registered Agent Form
4. Check in the amount of \$125.00 payable to Division of Corporations.

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02 JAN 16 PM 1:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Also enclosed is a check in the amount of \$35.00 payable to the Division of Corporations, in exchange for which we request a Certified Copy of the approval to transact business (\$30) as well as a Certificate of Status (\$5).

Should you have any questions, please do not hesitate to contact me.

Very truly yours,

Patrick E. Novak
PATRICK E. NOVAK

PEN/cmg
Enclosure

cc: G. Robert Toney
Alan Swimmer

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. Beacon Credit Services, LLC
(Name of foreign limited liability company)
2. Connecticut 3. 06-1531595
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. AUGUST 7, 2000 5. PERPETUAL
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. OPENING SALES OFFICE - JANUARY 2, 2002
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 44 LYME STREET
OLD LYME, CT 06371
(Street address of principal office)

8. If limited liability company is a manager-managed company, check here ☒

9. The name and usual business addresses of the managing members or managers are as follows:

ALAN SWIMMER, BEACON CREDIT SERVICES, 44 LYME ST., OLD LYME, CT 06371
ARSTIN SEDICUM, BEACON CREDIT SERVICES, 44 LYME ST., OLD LYME, CT 06371
CAROLE KERR, BEACON CREDIT SERVICES, 44 LYME ST., OLD LYME, CT 06371

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: BOAT LOAN
ORIGINATIONS

Alan Swimmer
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

ALAN SWIMMER
Typed or printed name of signer

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES,
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE
STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

BEACON CREDIT SERVICES, LLC

2. The name and the Florida street address of the registered agent and office are:

PATRICK E. NOVAK

(Name)

9100 SO. DADELAND BLVD. STE 1104

Florida street address (P.O. Box **NOT** ACCEPTABLE)

MIAMI, FL 33156

(City/State/Zip)

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

Patrick E. Novak

(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

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02 JAN 16 PM 1:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State,
and keeper of the seal thereof, DO HEREBY CERTIFY, that

BEACON CREDIT SERVICES, LLC

organized under the laws of Connecticut as a Limited Liability Company,
was filed in this office on August 7, 2000 and is in existence as of
the date of this certificate.

A handwritten signature in cursive script, reading "Susan Biquenicy", is written over a horizontal line.

Secretary of the State

Date Issued: December 12, 2001