

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AmeriFirst National Financial of Naples, LLC
(Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Tim North
(Name of Person)

AmeriFirst National Financial of Naples, LLC
(Firm/Company)

2536 Countryside Blvd., Sixth Floor
(Address)

Clearwater, FL 33763
(City/State and Zip Code)

2008 JUN -9 P 2 16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

For further information concerning this matter, please call:

Miranda Croft at (727) 726-0726
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy
- \$160.00 Filing Fee, Certificate of Status & Certified Copy



November 3, 2004

Florida Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee FL 32314

Re: AmeriFirst National Financial, LLC (W04000036690)
AmeriFirst National Financial of Naples, LLC (W04000036691)
AmeriFirst National Financial of Sarasota, LLC (W04000036692)
AmeriFirst National Financial of Venice, LLC (W04000036694)

Dear Sir/Madam,

Attached please find an original and one copy of the Certificate of Existence for the above Limited Liability Companies along with the Application by Foreign Limited Partnership for Authorization to Transact Business in Florida. It is my understanding that the filing fees are already in your possession. Please process as soon as possible.

If you have any questions please contact me at 727-726-0726.

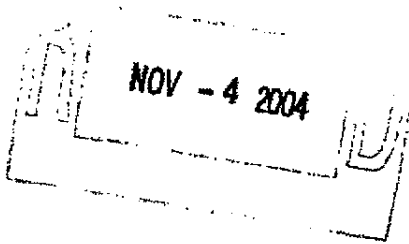
Thank you for your assistance in this matter.

Sincerely,



Timothy O. North

RS/gb



NOV - 4 2004



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

October 5, 2004

TIM NORTH
AMERIFIRST NATIONAL FINANCIAL OF NAPLES
2536 COUNTRYSIDE BLVD., SIXTH FLOOR
CLEARWATER, FL 33763

SUBJECT: AMERIFIRST NATIONAL FINANCIAL OF NAPLES, LLC
Ref. Number: W04000036691

We have received your document for AMERIFIRST NATIONAL FINANCIAL OF NAPLES, LLC and your check(s) totaling \$155.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Diane Cushing
Document Specialist

Letter Number: 904A00057816

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

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

1. AmeriFirst National Financial of Naples, LLC (Name of Foreign Limited Liability Company)

2. State of Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 3. 20-1607820 (FEI number, if applicable)

4. (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")

6. (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 2536 Countryside Blvd, 6th Floor Clearwater, FL 33763 (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: Tim North- 2536 Countryside Blvd, Sixth Floor, Clearwater, FL 33763

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: Any and all lawful business.

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.) Tim North Typed or printed name of signee

SECRETARY OF STATE 2011-9 P 2 16

**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:

AmeriFirst National Financial of Naples, LLC

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

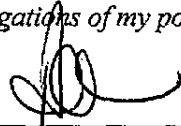
HEATHER L. NORTH
(Name)

2536 Countryside Blvd., Sixth Floor
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Clearwater FL 33763
City/State/Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2011-09-22 16:11:00

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, Florida Statutes.



(Signature)

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

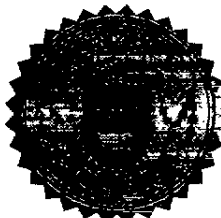
Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AMERIFIRST NATIONAL FINANCIAL OF NAPLES, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIFTH DAY OF OCTOBER, A.D. 2004.

2004 OCT -9 P 2:16
SECRETARY OF STATE
DELAWARE



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

3855511 8300

AUTHENTICATION: 3432230

040751282

DATE: 10-25-04