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(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL
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Special Instructions to Filing Officer:
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#### TRANSMITTAL LETTER

H Financial Group LLC
(Name of Limited Liability Company)

Chery L. How doer (Name of Person)

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

TO:

Registration Section
Division of Corporations

liability company to transact business in Florida..

Enclosed is a check for the following amount:

□ \$125.00 Filing Fee

Please return all correspondence concerning this matter to the following:

HEH FINANCIAL G	PAUD, ZLC SEE SE	and a
(Firm	n/Company)	2.000mg
8922 Ruffian La	we E	
. (4	Address)	J.
Newburgh IN (City/State	47630 te and Zip Code)	
For further information concerning this matter, please	se call:	
Chery/ L. Hosedann (Name of Person)	at (_8/2)490 -/600 (Area Code & Daytime Telephone Number)	
STREET ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
409 E. Gaines Street	P.O. Box 6327	
Tallahassee, Florida 32399	Tallahassee, Florida 32314	

□ \$130.00 Filing Fee & □ \$155.00 Filing Fee & \$\ \begin{array}{c} \text{S160.00 Filing Fee, Certificate} \\ \text{Certified Copy} \end{array} \text{S160.00 Filing Fee, Certificate} \text{Of Status & Certified Copy} \text{Of Status & Certified

### 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. H & H Financial Group, CCC (Name of Foreign Limited Liability Company)
2. TOTANA (Jurisdiction under the law of which foreign limited liability company is organized)  3. 35-206 1170 (FEI number, if applicable)
4. 12-10-98 (Date of Organization)  5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
(Date of Organization) (Duration: Year limited liability company will cease to
2 12-1-04
6. 12-1-04 (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 8922 RUFFIAN LANE
(Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here
8. If minited hability company is a manager-managed company, eneck here
9. The name and usual business addresses of the managing members or managers are as follows:
• • • • • • • • • • • • • • • • • • • •
Chery 1 L. Hasedorn 8972 Ruffing LANE Now Hardwood IN
Chery 1 L. Hogedorn, 8922 Ruffing LANE, Newburgh, IN
Chery 1 L. Hospedorn, 8922 Ruffins LANE, Newburgh, IN 47630
Chery 1 L. Hogedorn, 8922 Ruffini LANE, Newburgh, IN 47630
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in
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
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.)
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
<ul> <li>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.)</li> <li>11. Nature of business or purposes to be conducted or promoted in Florida:</li></ul>
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.)
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: Correspondent  Montgage Lending  Manda
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:  Correspondent  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
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:  **Correspondent**  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.)
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:  Correspondent  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

#### 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:

H& H FiNANCIAL GROUP, LLC	· · · · · ·		
The name and the Florida street address of the registered agent and office are:			
Michael G. Hagodorn	ΪΆĽ	0	
	ALL AHASSE	AON A	2 1
300 Miracle Strip PKwg Unit 1-H Florida Street Address (P.O. Box DOT ACCEPTABLE)	SSEE		
Foot holden Beach B 2254 &	FLO	PH 2:	

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 provided for in Chapter 608, Florida Statutes.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

## STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

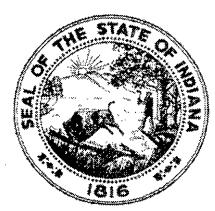
I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

#### H & H FINANCIAL GROUP LLC

duly filed the requisite documents to commence business activities under the laws of State of Indiana on December 10, 1998, and was in existence or authorized to transact business in the State of Indiana on November 23, 2004.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hercunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Twenty-Third Day of November, 2004.

TODD ROKITA, Secretary of State

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