# M05000002862-

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#### TRANSMITTAL LETTER

TO: Registration Section				
Division of Corporations				
SUBJECT: Sunshine Financial Group, L.L.C.				
(Name of Limited Liability Company)				
	ility Company for Authorization to Transact Business in emitted to register the above referenced foreign limited			
Please return all correspondence concerning this ma	tter to the following:			
Chantea Keown				
(Nam	ne of Person)			
Sunshine Financial Group, L.L.C.				
(Firm/Company)				
c/o P.O. Box 2304				
	Address)			
Lakeland, Florida 33806				
	te and Zip Code)			
For further information concerning this matter, plea	se call:			
Chantea Keown	at / 561 \ 542-2923			
(Name of Person)	at ( 561 ) 542-2923 (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			
Enclosed is a check for the following amount:				
\$125.00 Filing Fee	☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate  Status Certified Copy of Status & Certified Copy			



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 13, 2005

CHANTEA KEOWN SUNSHINE FINANCIAL GROUP, L.L.C. P.O. BOX 2304 LAKELAND, FL 33806

SUBJECT: SUNSHINE FINANCIAL GROUP, L.L.C.

Ref. Number: W05000024454

We have received your document for SUNSHINE FINANCIAL GROUP, L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the name of the Manager/Managing Member in section 9.,

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) 245-6967.

Letter Number: 905A00034711

Michelle Hodges Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

### 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:

Sunshine Financial Group, L.L.C. (Name of Foreign Lim	nited Liability Company)
Wyoming	20.0004042
(Jurisdiction under the law of which foreign limited liabi company is organized)	J.
April 22, 2005	5 "perpetual"
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
none as of yet (pending on application)	
(Date first transacted business	in Florida, if prior to registration.) 2 F.S. to determine penalty liability)
RR 4	
Loxahatchee, Florida 33470	
(Street Add	Idress of Principal Office)
If limited liability company is a manager-mana	naged company, check here
The name and usual business addresses of the	managing mambara or managana ara ag fallawa
c/o P.O. Box 2304 Nex Ge	nitial aging members of managers are as follows.
Lakeland, Florida [33806]	្វ
	an 90 days old, duly authenticated by the official having custody of rotocopy is not acceptable. If the certificate is in a foreign language, a se submitted.)
1. Nature of business or purposes to be conducted	ted or promoted in Florida: The business shall engage
in any activity or business permitted under the laws	s of the United States and the State of Florida
711/7/	Authorized
Signature of a member or a	an authorized representative of a member.
(In accordance with section 608.408	8(3), F.S., the execution of this document constitutes of perjury that the facts stated herein are true.)
NexGen, L.L.C authorized rep	presentative

Typed or printed name of signee

## 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	e of the Limited Liability C	Company is:	
Sunshine Fin	ancial Group, L.L.C.		
2. The name	e and the Florida street add	ress of the registered agent and office	are:
	Alfred Daise		
		(Name)	
	RR 4		
	Florida Street	t Address (P.O. Box NOT ACCEPTABLE)	
	Loxahatchee	FL 33470	<del></del>
		City/State/Zip	
liability comp agent and ag relating to th	pany at the place designated gree to act in this capacity. I se proper and complete perfo	and to accept service of process for the lin this certificate, I hereby accept the I further agree to comply with the proviormance of my duties, and I am familiagent as provided for in Chapter 608, I	appointment as registered isions of all statutes ir with and accept the

\$ 100.00 Filing Fee for Application

\$ 30.00 Certified Copy (optional)

\$ 5.00

\$ 25.00 Designation of Registered Agent

**Certificate of Status (optional)** 

# State of Wyoming

Office of the Secretary of State



United States of America, State of Wyoming

ss.

CERTIFICATE OF ORGANIZATION

**OF** 

... SUNSHINE FINANCIAL GROUP, L.L.C. ...

I, JOSEPH B. MEYER, Secretary of State of the State of Wyoming, do hereby certify that the prerequisites for the issuances of this certificate have been fulfilled in compliance with law, and are found to conform to law.

Accordingly, the undersigned, by virtue of the authority vested in me by law, hereby issues this Certificate.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Wyoming. Done at Cheyenne, the Capital, this 22<sup>ND</sup> day of APRIL A.D., 2005.

Secretary of State