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SEGNAL OF THE DESCRIPTION OF THE

ARTICLES OF CORRECTION **FOR** FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

FIRST Suns	The name of the limited liability company is: hine Financial Group, L.L.C.		<u> </u>
<u>SECO</u>	ND: The articles of organization or the application to transact business		
(CH	ECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STA	<u>ltemen</u>	<u>VT</u>
7	Contains an incorrect statement. The incorrect statement, the reason the stat incorrect, and the corrected statement are as follows: Incorrect mailing address for managers/members. Should read as for		
	NexGen, LLC		
	109 E. 17th Street, Suite 1		
	Cheyenne, Wyoming 82001		
	Was defectively signed. The manner in which the document was defectively the appropriate correction is as follows:	signed a Sewince I FALLAHASSEE F	and 05 MAY \$1 PH
			2:56
Dated:	Signature of a member or authorized representative of a member Typed or printed name of signee Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	Ä	J.

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:

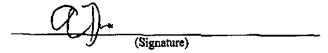
Sunshine Financial Group, L.L.C.	·	
(Name of Foreign Limited Liability Company)		
Wyoming 3, 20-2604843		
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)		
April 22, 2005 5, "perpetual"		
(Date of Organization) (Duration: Year limited liability company wi exist or "perpetual")	cease to	- _F
none as of yet (pending on application)		
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)		- , ,
RR 4		·
Loxahatchee, Florida 33470	_	••
(Street Address of Principal Office)	- 5	
. If limited liability company is a manager-managed company, check here	₩ 28	e, mg
. The name and usual business addresses of the managing members or managers are as follow	s: - ₁₀	
c/o P.O. Box 2304 Nex Gen, L.L.C.	12	
Lakeland, Florida [33806]		_
0. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having cure jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign laranslation of the certificate under oath of the translator must be submitted.)		conts in
1. Nature of business or purposes to be conducted or promoted in Florida: The business shall e	ngage	. .
in any activity or business permitted under the laws of the United States and the State of Florida		_• .
Authorized Authorized Apresentative		
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		· · · ·
Signature of a member or an authorized representative of a member.		- · · ·

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	me of the Limited Liability (Company is:				
Sunshine Financial Group, LL.C.						
2. The na	me and the Florida street add	ress of the registered agent and office are:				
	Alfred Daise					
		(Name)	and the second second			
	RR 4					
	Florida Stree	et Address (P.O. Box NOT ACCEPTABLE)	* . * * * * * * * * * * * * * * * * * *			
	Loxahatchee	FI_ 33470				
		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, 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)