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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

COS OCT 24 P 1: 09

ECRETARY OF STATE
TALLAHASSEE. FLORIDA

October 4, 2005

LAURETTA G. EASON 5785 PARKSTONE CROSSING DR. JACKSONVILLE, FL 32258

SUBJECT: THE LEAC FINANCIAL GROUP, LLC

Ref. Number: W05000045759

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

The designation of the registered agent must be at a Florida street address.

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) 245-6094.

Agnes Lunt Document Specialist

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

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COVER LETTER

2005 OCT 24 P 1: 09

TO: Registration Section
Division of Corporations

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: The LEAC Financial Group, 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:

Lauretta G. Lason		
(Name of Person)		
The LEAC Financial Group, LLC (Firm/Company)		
(Firm/Company)		
5785 Parkstone Crossing Dr. (Address)		
(Address)		
Tackson Ville, FL 32258 (City/State and Zip Code)		
(City/State and Zip Code)		

For further information concerning this matter, please call:

Lauretta Eason	at (904) 923-5442 or 854-8893
(Name of Person)	(Area Code & Daytime Telephone Number)

MAILING ADDRESS:

STREET ADDRESS:

Division of Corporations

Tallahassee, FL 32314

Division of Corporations

P.O. Box 6327

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Enclosed is a check for the	following amount:			
12/\$125.00 Filing Fee	□\$130.00 Filing Fee &	□\$155.00	Filing Fee &	☐\$160.00 Filing Fee, Certificate
	Certificate of S	tatus	Certified Conv.	of Status & Certified Com

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 THE GETER FOR FOREIGN
1. The LEAC Financial Group, LLC TALLAHASSEE, FLORIDA
1. The LEAC Financial Group, LLC IALLAHASSEE, FLORIDA (Name of Foreign Limited Liability Company)
2. De la marce (Jurisdiction under the law of which foreign limited liability company is organized) 3. 20-3440707 (FEI number, if applicable)
4. 10/1/05 (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
5785 Parkstone Crossing Dr. Jacksonville, FL 32258 (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:
Lauretta Eason 5785 Parkstone Crussing Dr. Jacksonville, FL 32.
P.O. BOX 16167 Nacksonville, FL 32.
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:
Investing In Real Estate.
Lauretta L. Eason
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.)
Lauretta G. Eason
Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

FILED

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

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.

Hauretta H. Esson
(Signature)

1. The name of the Limited Liability Company is:

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



The First State

PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "THE LEAC FINANCIAL GROUP, 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 NINETEENTH DAY OF SEPTEMBER, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.



Warriet Smith Hindson
Harriet Smith Windson, Secretary of State

AUTHENTICATION: 4165279

DATE: 09-19-05

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