M06000001168

(Re	equestor's Name)
(Ac	ddress)
- (Ac	ddress)
(Ci	ty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bı	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer;

Office Use Only



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SECRETARY OF STATE

06 FEB 27 FH 2:



ACCOUNT NO. : 072100000032					
REFERENCE : 889713 7155110					
AUTHORIZATION : THE BEAR TO SEE					
COST LIMIT : \$ 125.00					
ORDER DATE: February 27, 2006					
ORDER TIME: 2:34 PM					
ORDER NO. : 889743-005					
CUSTOMER NO: 7155110					
FOREIGN FILINGS					
NAME: SECURITY SETTLEMENT SERVICES, LLC					
XXXX QUALIFICATION (TYPE: LL)					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX PLAIN STAMPED COPY					
CONTACT PERSON: Heather Chapman EXT# 2908					
EXAMINER:					

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

N COMPILANCE WITH SECTION 608 503 FI ORIOS	STATUTES, THE FOLLOWING IS SUBMITTED TO REGISSER A FOREIG S IN THE STATE OF FLORIDA:
IMITED LIABILITY COMPANY TO TRANSACT BUSINES	S IN THE STATE OF FLORIDA:
Security Settlement Services, LLC	美 二
(Name of Foreign	Limited Liability Company)
DE	3.
(Jurisdiction under the law of which foreign limited company is organized)	liability (FEI number, if applicable)
1/23/06	5. perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
n/a	
(Date first transacted busin (See sections 608.501 & 608	ness in Florida, if prior to registration.) 3.502 F.S. to determine penalty liability)
3001 Leadenhali Road, Mount Laurei, NJ 08054	
(Street	Address of Principal Office)
If limited liability company is a manager-n	nanaged company, check here
TTV	de a como año a mambana ao managana ara ao fallavez
The name and usual business addresses of	the managing members or managers are as follows:
CSSG Affiliates Holdings, Inc., 3001 Leadenhail	Road, Mount Laurel NJ 08054
	. –
O. Attached is an original certificate of existence, no mor	e than 90 days old, duly authenticated by the official having custody of records
e jurisdiction under the law of which it is organized. (A austation of the certificate under oath of the translator m	photocopy is not acceptable. If the certificate is in a foreign language, a
dispandi di de centrale dile, canto di le daismo: ili	,
1. Nature of business or purposes to be conc	lucted or promoted in Florida: title and settlement services
_	
	<u> </u>
Y'IVIn >	•
Signature of a member	or an authorized representative of a member.
(In accordance with section 60	8.408(3), F.S., the execution of this document constitutes
an affirmation under the penal Richard S. Meisner, SVP a	ties of perjury that the facts stated herein are true.)
i ypea a	r 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	of the Limited Liability	Company is:		
Security Settler	ment Services, LLC			
2. The name	and the Florida street ac	ddress of the registered agent and office are:		
	Corporation Service Company			
		(Name)		
	1201 Hays Street			
	Florida Street Address (P.O. Box NOT ACCEPTABLE)			
	Tallahassee	FL 32301		
		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.

By: Conforation Service Confinany

By: Conforation Service Confinanty

(Signature)

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

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Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SECURITY SETTLEMENT SERVICES, 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-SEVENTH DAY OF FEBRUARY, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SECURITY SETTLEMENT SERVICES, LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF JANUARY, A.D. 2006.

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

Warriet Smith Windson Harriet Smith Windson, Secretary of State

AUTHENTICATION: 4551297

DATE: 02-27-06