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(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL	
(Business Entity Name)  (Document Number)	04/2
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COVERLETTER

2006 109 20 P 4: 19

TO: Registration Section Division of Corporations TALL/ MAY OF STATE

SUBJECT: Access Financial Southeast, 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:

Mary Ann Powell
(Name of Person)
Ç A
Delaware Corporate Services inc.
(Firm/Company)
₩ *
222 Delaware Avenue 10th Floor
(Andress)
<b>₩.</b> 4
Wilmington, DE 19801
(City/State and Zip Code)

For further information concerning this matter, please call:

Mary Ann Powell at (302) 888-6839
(Name of Person) (Area Code & Daytime Telephone Number)

MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS:
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



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## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA 200 APR 20 P 4: 19

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED STOCKEGISTER ACFORTIONE LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: TALLAHASSEE, FLORIDA 1. Access Financial Southeast, LLC (Name of Foreign Limited Liability Company) 204303672 2. Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 4. 02-27-2006 Perpetual (Duration: Year limited liability company will cease to exist or "perpetual") (Date of Organization) (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S, to determine penalty liability) 185 NW Spanish River Blvd. Suite 250 Boca Raton, Fl 33431 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here X 9. The name and usual business addresses of the managing members or managers are as follows: Shawn Ruben 185 NW Spanish River Blvd. Suite 250 Boca Raton, Fl 33431 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.) Financial Services -11. Nature of business or purposes to be conducted or promoted in Florida: Deferred Deposit, Ancillary Products 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.)

Typed or printed name of signee

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#### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

SECRETARY UF STATE TALLAHASSEE, FLORIC

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.

7 M C. T. T. T. T. 1111. A	
1. The name of the Limited Liability Company	ie.

Access Financial Southeast, LLC

2. The name and the Florida street address of the registered agent and office are:

Access Financial Southeast, LLC (Name)

185 NW Spanish River Blvd. Ste. 250
Florida Street Address (P.O. Box NOT ACCEPTABLE)

Boca Raton, FL 33431 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)

# Delaware

#### The First State

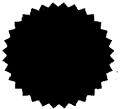
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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF SHEET STATE SEATE TALLAHASSEE, FLORIDA DELAWARE, DO HEREBY CERTIFY "ACCESS FINANCIAL SOUTHEAST, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF APRIL, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ACCESS FINANCIAL SOUTHEAST, LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF FEBRUARY, A.D. 2006.



Darriet Smith Windson Secretary of State 8642

DATE: 04-19-06