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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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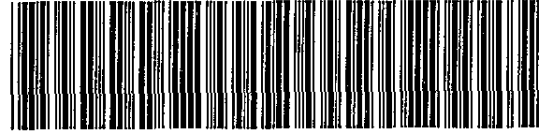
(Business Entity Name)

(Document Number)

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A handwritten signature in black ink, consisting of a stylized 'S' followed by a loop and a vertical stroke.

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SUNBURST 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:

NITA THOMPSON  
(Name of Person)  
SUNBURST FINANCIAL GROUP, LLC  
(Firm/Company)  
300 CENTURY PARK SOUTH, STE 100  
(Address)  
BIRMINGHAM, AL 35226  
(City/State and Zip Code)

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For further information concerning this matter, please call:

NITA THOMPSON at (205) 823 4949 x 100  
(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

Enclosed is a check for the following amount:

- \$125.00 Filing Fee     \$130.00 Filing Fee & Certificate of Status     \$155.00 Filing Fee & Certified Copy     \$160.00 Filing Fee, Certificate of Status & Certified Copy

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:

1. SUNBURST FINANCIAL GROUP, LLC  
(Name of Foreign Limited Liability Company)

2. ALABAMA  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 20-2550493  
(FEI number, if applicable)

4. 3/23/05  
(Date of Organization)

5. PERPETUAL  
(Duration: Year limited liability company will cease to exist or "perpetual")

6. N/A  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 300 CENTURY PARK SOUTH, SUITE 100  
BIRMINGHAM AL 35226  
(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:

JAMES R MARTIN (SOLE PROPRIETOR) 300 CENTURY PARK SOUTH STE 100  
BIRMINGHAM, AL 35226

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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:

FINANCIAL PLANNING & INSURANCE AND INVESTMENT SERVICES.

[Signature]  
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.)

JAMES R. MARTIN  
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 of the Limited Liability Company is:

SUNBURST FINANCIAL GROUP, LLC

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

Agents and Corporations, Inc.

(Name)

773 4th Avenue - Suite E

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Naples

FL

34102

City/State/Zip

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*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.*

David M. Williams

(Signature)

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

Nancy L. Worley  
Secretary of State

P.O. Box 5616  
Montgomery, AL 36103-5616

# STATE OF ALABAMA

I, Nancy L. Worley, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the domestic corporate records on file in this office disclose that SunBurst Financial Group, LLC organized in the office of the Judge of Probate of Jefferson County on March 23, 2005. I further certify that the records do not disclose that said SunBurst Financial Group, LLC has been dissolved.

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In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

April 25, 2006

Date



Nancy L. Worley

Secretary of State