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B. B. Lock JUN 02 2006

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ELITE SPECIALTY FINANCE, 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:

JUSTIN SINGER  
(Name of Person)

ELITE SPECIALTY FINANCE, LLC  
(Firm/Company)

191 SHEREE BLVD.  
(Address)

EXTON, PA 19341  
(City/State and Zip Code)

For further information concerning this matter, please call:

JUSTIN SINGER at (610) 423-4118  
(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  
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

✓ 1. ELITE SPECIALTY FINANCE, LLC  
(Name of Foreign Limited Liability Company)

✓ 2. PA 3. 43-2054756  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 1/22/04 5. PERPETUAL  
(Date of Organization) (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. 191 SHEREE BLVD.  
EXTON, PA 19341  
(Street Address of Principal Office)

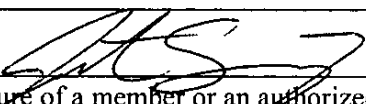
8. If limited liability company is a manager-managed company, check here ☐

9. The name and usual business addresses of the managing members or managers are as follows:

Christopher Naylor - MEMBER - 191 Sheree Blvd. Exton, PA 19341  
\_\_\_\_\_  
\_\_\_\_\_

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: MORTGAGE BROKER

  
\_\_\_\_\_  
Signature of a member or an authorized representative of a member.  
(In accordance with section 608.408(5), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

JUSTIN SINGER

Typed or printed name of signee

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DIVISION OF CORPORATIONS  
06 MAY 25 AM 10:12

**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:

ELITE SPECIALTY FINANCE, LLC

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


INCorp SERVICES, INC.  
(Name)

18450 NE 2<sup>ND</sup> AVE.  
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

MIAMI FL 33179  
City/State/Zip

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DIVISION OF CORPORATIONS

*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.*

 on behalf of Incorp Services, Inc.  
(Signature)

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

**COMMONWEALTH OF PENNSYLVANIA**

**DEPARTMENT OF STATE**

**APRIL 27, 2006**

**TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:**

**I DO HEREBY CERTIFY THAT,**

**ELITE SPECIALTY FINANCE, LLC**

**is duly organized as a Pennsylvania Limited Liability Company under the laws of  
the Commonwealth of Pennsylvania and remains subsisting so far as the records  
of this office show, as of the date herein.**



**IN TESTIMONY WHEREOF, I have  
hereunto set my hand and caused  
the Seal of the Secretary's Office to  
be affixed, the day and year above  
written.**

*Pedro A. Contis*

**Secretary of the Commonwealth**