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| PICK-UP | ☐ WAIT | MAIL |
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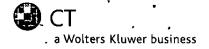
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SECRETARY OF STATE

FILED



CT 1203 Governors Square Blvd. Tallahassee, FL 32301-2960 850 222 1092 tel 850 222 7615 fax www.ctlegalsolutions.com

June 19, 2006

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301

Re: Order #: 6666081 SO

Customer Reference 1: none given

Customer Reference 2:

Dear Department of State, Florida:

Please obtain the following:

American Viatical Services, Inc. (GA), Qualification Florida

American Viatical Services, Inc. (GA) Certificate of Status/Authorization-Foreign Florida

American Viatical Services, Inc. (GA) Cert Copy of Certificate of Authority Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.



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:

| American Vi | atical Services, LLC | | | _ |
|--|--|---------------------|--|-------------------------|
| **** | (Name of Foreign Lir | nited L | iability Company) | |
| Georgia | | | 58-2167040 | |
| (Jurisdiction unde company is organ | r the law of which foreign limited lial ized) | oility | (FEI number, if ap | oplicable) |
| 04/07/95 | | 5 | | |
| (D | ate of Organization) | | (Duration: Year limited liability exist or "perpetual") | company will cease to |
| . Upon qu | alification | | | |
| · | (Date first transacted business (See sections 608.501 & 608.5 | s in Flo 02 F.S. | rida, if prior to registration.) to determine penalty liability) | 7006 12 14 |
| 175 Townpa | ark Dr, NW, Suite 400 | | | |
| Kennewaw. | GA 30144-5801 | | | 19 19 |
| | | ddress o | of Principal Office) | Fig. 32 |
| . If limited liab | lity company is a manager-mar | naged | company, check here 🗸 | PH 1:54 |
| The name and | usual business addresses of the | mana | ging members or managers ar | 5 |
| Philip Loy, | 175 TownPark Drive, Suite | 400, | Kennesaw, GA 30144 | |
| e jurisdiction under anslation of the certi | ginal certificate of existence, no more the the law of which it is organized. (A pho- ficate under eath of the translator must be siness or purposes to be conduc | otocopy oe subm | is not acceptable. If the certificate is in itted.) | n a foreign language, a |
| | (In accordance with section 608.40 | 8(3), F.: | horized representative of a me S., the execution of this document const ry that the facts stated herein are true.) | ember. itutes |
| | Philip R. Loy | ادمهسند | | |
| | i ypea or pi | rinted | 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: | |
|--|--|
| American Viatical Services, LLC | |
| 2. The name and the Florida street address of the registered agent and office are: | |
| C T Corporation System (Name) | |
| 1200 South Pine Island Rd. Florida Street Address (P.O. Box NOT ACCEPTABLE) | |
| Plantation FL 33324 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.

Jenniter F. Aultman Assistant Secretary

(Signature)

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Control No. K512059

STATE OF GEORGIA

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Cathy Cox, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

AMERICAN VIATICAL SERVICES, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 04/07/1995 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 17th day of May, 2006

Cathy Cox Secretary of State

Certification Number: 54470-2 Reference:

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp