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SECRETARY OF STATE FALLAHASSEE, FLORIDA

### COVER LETTER

SUBJECT:	Latitude Acceptan	ce Associates, LLC		
	(Name of	Limited Liability Company)		
Florida," Certificat	lication by Foreign Limited e of Existence, and check a o transact business in Florid	d Liability Company for Author are submitted to register the abords	ization to Transact B	tusiness i Ilimited
Please return all co	rrespondence concerning the	his matter to the following:		
	J	anet Teague	700 SE TAL	
		(Name of Person)	6 SEP 1 CRETAI LAHAS	T1
***************************************	C	ornerstone Support, Inc.	第2 5	
		(Firm/Company)	D 2: OF STA	J
		11111 Houze Road, Suite 200		
		(Address)		
-	Rosw	vell, GA 30076	A September 1	
	(Cit	y/State and Zip Code)		
For further informa	tion concerning this matter	, please call:		
Janet Teagu	e	at ( 770 ) 587-	4595	
	(Name of Person)	(Area Code & Daytim	e Telephone Number	•)
MAILING	ADDRESS:	STREET ADDRESS:		
Division of Corporations		Division of Corporations		
P.O. Box 63		Clifton Building		
Tallahassee,		2661 Executive Center Ci	rola	

## 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.	Latitude Acceptance Ass	ociates, LLC (Name of Foreign Li	mited Lia	oility Company)			<u></u>
2.	MI		3	20-4262900			
	(Jurisdiction under the law or company is organized)	which foreign limited lia	bility	( FEI num	ber, if applica	ble)	
4.	(Date of Orga	/31/06 nization)	5.	Perpetual (Duration: Year limite exist or "perpetual")	d liability com	pany will o	cease to
6.	Upon Approval (Da	ite first transacted busines sections 608.501 & 608.5	s in Florid 02 F.S. to	a, if prior to registration determine penalty liabil	ity)	· · · · · · · · · · · · · · · · · · ·	
7.	1760 S. Telegraph Road	Ste. 102			A SEG	78	
	Bloomfield Hills			MI	£7; 4830	SEP .	# 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	If limited liability comp	any is a manager-mar	naged co			13 D 2:	TI O
9,	Bradley Schram 176	siness addresses of the				follows:	
he	Attached is an original certific jurisdiction under the law of versiation of the certificate under Nature of business or p	hich it is organized. (A phonin of the translator must	otocopy is be submitt	not acceptable. If the cert ed.)	ificate is in a fi	සේලා කල	
	. Italiano on displicos on p	arpooto to oo oonaao	www.p.	Oxionos III I Ioniom.			
٠	(In ac	ature of a member or cordance with section 608.40 irrnation under the penaltics	)8(3), F.S.,	the execution of this docur	nent constitutes	ne T.	ngga water firebushin kananan gaya. <sup>P</sup>

Bradley Schram, President of Latitude Financial Group, Inc./Member

Typed or printed name of signee

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

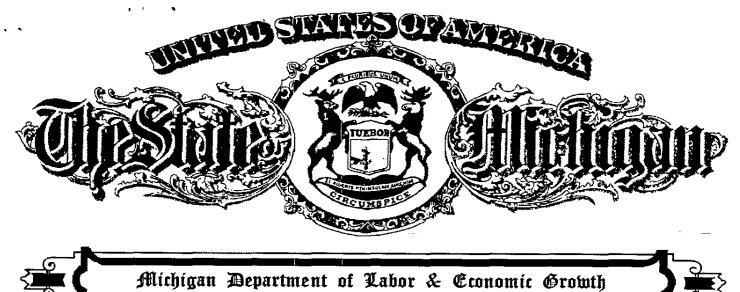
PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the I	imited Liability Company	y is:			
Latitude Acceptance	Associates, LLC			*****	
2. The name and the	Florida street address of t	he registered	l agent and offic	ce are:	
	Corporation Service Company				
	(Name)		7006 SE SECRE	7	
	1201 Hays Street	1201 Hays Street		SEP 13 RETARY CAHASSEE	Promise Columbia
	Florida Street Address	Florida Street Address (P.O. Box NOT ACCEPTABLE)			
	Tallahassee,	FL	32301	P 2: 0 F STA FLCR	O
		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,

Georgia Byton / ASST VP

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



Lansing, Michigan

This is to Certify That

### LATITUDE ACCEPTANCE ASSOCIATES, LLC

was validly organized on January 31, 2006 as a Limited Liability Company. Said Limited
Liability Company is validly in existence under the laws of this state and has satisfied its annual filing obligations.

This certificate is issued pursuant to the provisions of 1993 PA 23, as amended, to attest to the fact that the company is in good standing in Michigan as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 29th day of August, 2006

Bureau of Commercial Services

.Director