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FLORIDA FILING & SEARCH SERVICES, INC. P.O. BOX 10662 TALLAHASSEE, FL 32302 1333 N. DUVAL STREET, TALLAHASSEE, FL 32303 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 09-20-06

NAME: FOX FINANCIAL, LLC

TYPE OF FILING: APPLICATION TO TRANSACT BUSINESS

COST: CK FOR \$125 ATTACHED

RETURN:

ACCOUNT: FCA0000000015

AUTHORIZATION: ABBIE/PAUL HODGE

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUM LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THI		O REGISTER A FOREIGN.
1. Fox Financial, LLC		京 5
(Name of Foreign Limited	Liability Company)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
2. Illinois	3. 36-4432032	態のか
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applica	PHAP SEC. FLOW
4. 04/02/2001	5. 04/01/2050	. F. C
(Date of Organization)	(Duration: Year limited liability com exist or "perpetual")	pany will cease to
6. Upon registration		y
(Date first transacted business in F (See sections 608,501 & 608,502 F.S	lorida, if prior to registration.) 5. to determine penalty liability)	
7. 9435 Bormet Drive, Suite 2		
Mokena, IL 60448		
(Street Address	s of Principal Office)	
8. If limited liability company is a manager-managed	d company, check here	
9. The name and usual business addresses of the man	naging members or managers are as	follows:
Len E. Cooper Jr.		
9435 Bormet Drive, Suite 2		
Mokena, IL 60448		
10. Attached is an original certificate of existence, no more than 90 the jurisdiction under the law of which it is organized. (A photoco translation of the certificate under oath of the translator must be suf	py is not acceptable. If the certificate is in a	
11. Nature of business or purposes to be conducted of	or promoted in Florida:	
Mortgage lending and/or brokering		
d Elos L		
Signature of a member or an a	uthorized representative of a memb	
	F.S., the execution of this document constitute rjury that the facts stated herein are true.)	•
Len E. Cooper Jr.		

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.

. The name of the Limited Liability Company is:	
Fox Financial, LLC	_
. The name and the Florida street address of the registered agent and office are:	
Florida Filing & Search Services, Inc.	
(Name)	
155 office Plaza Dr. Suite A	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Tallahassee FL 32301	
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)



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

FOX FINANCIAL, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON APRIL 02, 2001, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE RELATING TO THE FILING OF THE ARTICLES AND PAYMENT, AND IS ORGANIZED TO TRANSACT BUSINESS IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this

day of

JUNE

A.D.

2006

Desse White