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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE TALLAHASSEE FLORIDA

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COVER LETTER

	tration Section ion of Corporations		
SUBJECT:	Jefferson	Funding LLC	
	(Name of Lim	nited Liability Company)	
Florida," Cert		ability Company for Authorization to Transa ubmitted to register the above referenced for	
Please return	all correspondence concerning this n	natter to the following:	
	Vilen M	lelik-Alaverdian	
	(Na	ame of Person)	
	Jefferso	on Funding LLC	··· /
	(Fi	rm/Company))6 O
	300 Lyr	nn Shore Dr. #711	CT 24 RETARY HASSE
		(Address)	
	Lvnn	ı, MA 01902	24 AHII: 5 TARY OF STATE ASSEE FLORIDA
		tate and Zip Code)	_ A''' 7
For further in	formation concerning this matter, ple	ease call:	
	71		
	Vilen Melik-Alaverdian	at (_781) _5984015	
	(Name of Person)	(Area Code & Daytime Telephone Nur	mber)
MAII	LING ADDRESS:	STREET ADDRESS:	
	Division of Corporations Division of Corporations		
	Box 6327	Clifton Building	
i aiiar	nassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	
	check for the following amount: 5.00 Filing Fee \$\sum \text{Certificate of } Certific		e, Certificate & Certified Copy

FILED

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: Jefferson Funding LLC (Name of Foreign Limited Liability Company) Delaware 20-3265979 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 07/15/2005 Perpetual (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) **67 Green Street** Newton, MA 02458 (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: Vilen Melik-Alaverdian President/Managing Member 67 Green Street, Newton, MA 02458 Stephen Leone Chairman/Managing Member 67 Green Street, Newton, MA 02458 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(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Vilen Melik-Alaverdian

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:	
	., <u>.</u>
2. The name and the Florida street address of the registered agent and office are:	
Yourik Melik-Allaverdian	06 OCT 24 SECRETARI TALLAHASSI
3369 Dry Geek Dr. Florida Street Address (P.O. Box NOT ACCEPTABLE)	in
Tallahassee FL 32309	AH II: 57 OF STATE FLORIDA

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.

Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "JEFFERSON FUNDING LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE ELEVENTH DAY OF OCTOBER, A.D. 2006.



Harriet Smith Windson Secretary of State

AUTHENTICATION: 5106621

DATE: 10-11-06

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