M0700000434

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
AUTHORIZATION PROMETO CORRECT # 1 DATE 1/24/07 DOC. EXAM.		

Office Use Only



500084579675

01/23/07--01028--011 **130.00

O7 JAN 23 AMII: 33
SECRETARY OF STATE
ANALYSEE FI ORIO

N. O. Com I have at a com

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: AMERIFIRST NATIONAL FINANCIAL SERVICES OF BRANDON, L.L.C.

(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:

Enclosed is a check for the following amount:

Certificate of Status

TIMOTHY O NORTH		
-	(Name of Person)	
(Firm/Company)		
2536 COUNTRYSIDE BLVD 6TH FLOOR		
	(Address)	
CLEARWATER FL 33763		
(City	/State and Zip Code)	
For further information concerning this matter,	please call:	
·		
TIMOTHY O NORTH	at (727) 726-0726	
(Name of Person)	(Area Code & Daytime Telephone Number)	
MAILING ADDRESS:	STREET ADDRESS:	
Division of Corporations	Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	
	Tallahassee, FL 32301	

□\$155.00 Filing Fee & □\$160.00 Filing Fee, Certificate

of Status & Certified Copy

Certified Copy



IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. <u>/</u>	AMERIFIRST NATIONAL FINANCIAL SERVICES OF BRANDON, L.L.C.	
	(Name of Foreign Limited Liability Company)	
2. <u> </u>	DELAWARE urisdiction under the law of which foreign limited liability (FEI number, if applicable)	
CO (J	urisdiction under the law of which foreign limited liability (FEI number, if applicable) impany is organized)	
4 1	JANUARY 3, 2007 _{5.} PERPETUAL	
т	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
	exist of perpetual y	
6	(Date first transacted business in Florida, if prior to registration.)	
	(See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7	2536 COUNTRYSIDE BLVD 6TH FLOOR 罢口表 四	
	CLEARWATER FI 33763	
-	CLEARWATER FL 33763 (Street Address of Principal Ornice)	
0 1	If limited liability company is a manager-managed company, check here	
ð. J	I firmited flability company is a manager-managed company, check here	
9. 7	The name and usual business addresses of the managing members or managers are as follows:	
	MGRM: TIMOTHY O NORTH, 2536 COUNTRYSIDE BLVD 6TH FLOOR	
	CLEARWATER FL 33763	
	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in	n
	urisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a slation of the certificate under oath of the translator must be submitted.)	
	·	
11.	Nature of business or purposes to be conducted or promoted in Florida: INSURANCE SALES	
-	THOI	
	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.) TIMOTHY O NORTH	

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:

AMERIFIRST NATIONAL FINANCIAL SERVICES OF BRANDON, L.L.C.

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

HEATHER L NORTH, ESQ.	-1.0 O
(Name)	7 JA
2536 COUNTRYSIDE BLVD 6TH FLOOR	N 23
. Florida Street Address (P.O. Box NOT ACCEPTABLE)	SEE C
CLEARWATER FL 33763	FLOR
City/State/Zip	AND 13

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)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AMERIFIRST NATIONAL FINANCIAL SERVICES OF BRANDON, L.L.C." 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 EIGHTEENTH DAY OF JANUARY, A.D. 2007.

ANYS OF THE PARTY OF THE PARTY

Warriet Smith Windson Secretary of State

AUTHENTICATION: 5365057

DATE: 01-18-07

4280660 8300

070059666