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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Business Lending Solu	nitions LLC nited Liability Company)
(Name of Lin	atted Liability Company)
The enclosed "Application by Foreign Limited Li Florida," Certificate of Existence, and check are s liability company to transact business in Florida.	ability Company for Authorization to Transact Business in abmitted to register the above referenced foreign limited
Please return all correspondence concerning this i	natter to the following:
James Benincasa	
(N	ame of Person)
Business Lending Solu	· · · · · · · · · · · · · · · · · · ·
(F)	irm/Company)
18255 83rd Avenue N	
	(Address)
Maple Grove, MN 553	
	tate and Zip Code)
For further information concerning this matter, pl	ease call:
Jody Benincasa	at (612) 269-5006
(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
Enclosed is a check for the following amount: \$\sumset\$	t □\$155.00 Filing Fee & □\$160.00 Filing Fee, Certificate of Status Certified Copy of Status & Certified Copy
साहार्यः अवस्यान्ति । १००० स्वर्ध	• • • • • • • • • • • • • • • • • • • •



August 1, 2007

JAMES BENINCASA 18255 83RD AVENUE N. MAPLE GROVE, MN 55311

SUBJECT: BUSINESS LENDING SOLUTIONS LLC

Ref. Number: W07000037180

We have received your document for BUSINESS LENDING SOLUTIONS LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 307A00047583

Leslie Sellers Document Specialist

Division of Corporations - P.O. BOY 6397 Tallahasson Florida 39314

`APPLICATION BY FOREIGN LIMITED LÍABILITY 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. Business Lending Solutions LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," of the company of the comp	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.,"	or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attaconsent of the managers or managing members adopting the alternate name. The alternate name must include Company," "L.L.C.," "LLC.")	ch a copy of the written "Limited Liability
2. Minnesota (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)
4. July 9, 2007 (Date of Organization) 5. Perpetual (Duration: Year limited liability comparexist or "perpetual")	ny will cease to
6(Date first transacted business in Florida, if prior to registration.)	
(See sections 608.501 & 608.502 F.S. to determine penalty liability)	•
7. 18255 83rd Avenue N	·
Maple Grove, MN 55311	
(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 fo	llows:
JAMES BENINCASA - SINGLE MEMBEL MGR	m
18255 83A AVE N	
MAPLE BLOVE, MV 55311	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a fore 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: Business	s Finance
and Commercial Lending	·
Ath String	70 8
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.) Jody Benincasa	2007 AUG 10 SECRETARY
Typed or printed name of signee	
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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:
Business Lending Solutions LLC
If name unavailable, the alternate name to be used in the state of Florida is:
2. The name and the Florida street address of the registered agent and office are:
Jody Benincasa (Name)
14801 Glen Eden Drive Florida Street Address (P.O. Box NOT ACCEPTABLE)
Naples, FL 34110 FL 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.

Management (Signature)

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

2007 AUG TO PM 5: 1

state of Minnesota

SECRETARY OF STATE

Certificate of Good Standing

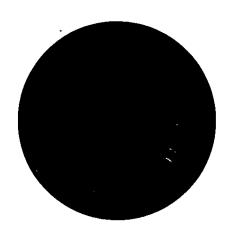
I, Mark Ritchie, Secretary of State of Minnesota, do certify that: limited liability company listed below is a limited liability company formed or registered to do business under the laws of Minnesota; the limited liability company was formed by the filing of articles of organization or registered to do business by filing an application for a certificate of authority with the Office of the Secretary of State on the date listed below; the limited liability company is governed by Chapter 322B of Minnesota and this limited liability company is authorized to do business as а limited liability company at the time this certificate is issued.

Name: Business Lending Solutions, LLC

Date Formed or Registered: July 9, 2007

State of Organization: Minnesota

This certificate has been issued on July 17, 2007.



FILED

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SECRETARY OF STATE ORIDA

ALLAHASSEE, FLORIDA

Secretary of State.

Mark 1