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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Home Funding Group, LLC d/b/a 800-345-CASH		
(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:		
Kimberley Olmstead		
(Name of Person)		
Home Funding Group, LLC. d/b/a 800-345-CASH		
(Firm/Company)		
90 Grove Street Suite 110		
(Address)		
Ridgefield, CT 06877		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Kimberley Olmstead at (203) 403.1045		
(Name of Person) (Area Code & Daytime Telephone Number)		
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
Enclosed is a check for the following amount: [Inclosed is a check for the fo		



August 28, 2007

KIMBERLEY OLMSTEAD 90 GROVE STREET, STE. 110 RIDGEFIELD, CT 06877

SUBJECT: HOME FUNDING GROUP, LLC.

Ref. Number: W07000042346

We have received your document for HOME FUNDING GROUP, 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.

Leslie Sellers Document Specialist

Letter Number: 607A00051679

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:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE SI	
1. Home Funding Group, LLC. (Name of Foreign Limited Liability Company; must include	
(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 consent of the managers or managing members adopting the alternate of the managers of managing members adopting the alternate of the managers of managers and managers adopted for the purpose of the managers of managers and managers are managers and managers are managers and managers are managers and managers and managers are managers and managers are managers and managers are managers and managers are managers and managers and managers are managers and managers and managers are managers and managers are managers and managers and managers are managers and managers and managers are managers and m	
Company," "L.L.C.," "LLC.")	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
2. New York 3.	55-0865638
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. 04/23/2004 5.	Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6(Date first transacted business in Flori	da if prior to registration.)
(See sections 608.501 & 608.502 F.S. to	determine penalty liability)
7. 90 Grove Street Suite 110	
Ridgefield, CT 06877	,
(Street Address of	Principal Office)
8. If limited liability company is a manager-managed co	ompany, check here
9. The name and usual business addresses of the manag	ing members or managers are as follows:
90 Grove Street Suite 110 MAGE	RIEY F. OLMSTEAD MORN
Ridgefield, CT 96877 90 Ge	XEST SUITE 110
RIDGE	FIEW, CT 06877
10. Attached is an original certificate of existence, no more than 90 day the jurisdiction under the law of which it is organized. (A photocopy is translation of the certificate under oath of the translator must be submit	s not acceptable. If the certificate is in a foreign language, a ted.)
Know De 1911	Must Egg 1
Signature of a member or an auth	orized 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 Kimberley Olmstead	that the facts stated herein are true.)
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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:	
Home Fund	ling Group, LLC. d/b/a 800-345-CASH	
If name unavail	able, the alternate name to be used in the state of Florida is:	
2. The name ar	nd the Florida street address of the registered agent and office are:	
NRAI Service, Inc.		
	(Name)	
2731 Executive Park Drive, Suite 4 Florida Street Address (P.O. Box NOT ACCEPTABLE)		
	Plotted Street Address (1.0. Dox MOT Access TABLE)	
	Weston 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.

(Signature)

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

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State of New York Department of State } ss:

I hereby certify, that HOME FUNDING GROUP, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 04/23/2004, and that the Limited Liability Company is existing so far as shown by the records of the Department.

A Certificate of Amendment HOME FUNDING GROUP, LLC, changing its name to FUNDING SOLUTIONS, LLC, was filed 11/14/2005.

A Certificate of Amendment FUNDING SOLUTIONS, LLC, changing its name to HOME FUNDING GROUP, LLC, was filed 09/12/2006.

WITNESS my hand and the official seal of the Department of State at the City of NE Albany, this 17th day of August two thousand and seven.

Special Deputy Secretary of State

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SECRETARY OF STATE