## MOTOCOOLAIZ

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SECRETARY OF STATE

## **COVER LETTER**

TO:

Registration Section

Division of Corporations
SUBJECT: Legacy Lending Company of Destin, LLC (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:
AShton Noel (Name of Person)
Legacy Lending Company of Destin, LCC (Firm/Company)
1/80 W. Causeway Approach Building 1 (Address)
Mandeville, La 70471 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (985) 6/22/23 (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:  \$\Begin{array}{c} \pm \sqrt{125.00 Filing Fee} & \Begin{array}{c} \pm \sqrt{130.00 Filing Fee} & \Begin{array}{c} \pm \sqrt{155.00 Filing Fee} & \Begin{array}{c} \pm \sqrt{160.00 Filing Fee}, Certificate \text{ of Status & Certified Copy} \end{array} \$\text{ of Status & Certified Copy} & \text{ of Status & Certified Copy} \end{array}

## 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: Legacy Lending Company of Destin, Lee
(Name of Foreign Limited Liability Company, ""L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.") 3. 59-3678556 (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability 2007 (Duration: Year limited liability company will cease to (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 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: NOLA Lending Group, LC, 180 W. Causeway, Ridg 2, Mandeville, La 70471
Florida Investment Grappica 1200 W. Causeway, Stal7, Mandeville, La 70471 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 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.)

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:	
Legacy Lending Company of Destin, LIC	
If name unavailable, the alternate name to be used in the state of Florida is:	
N/A	
2. The name and the Florida street address of the registered agent and office are:	OT NO.
Pohton Noel	126 PY
151 Regions Way, Suite 4A Florida Street Address (P.O. Box NOT ACCEPTABLE)	NOV 26 PH 12: 12
Florida Street Address (P.O. Box NOT ACCEPTABLE)	Pri
Destin, FL 30541	
Having been named as registered agent and to accept service of process for the above state liability company at the place designated in this certificate, I hereby accept the appointme agent and agree to act in this capacity. I further agree to comply with the provisions of all relating to the proper and complete performance of my duties, and I am familiar with and obligations of my position as registered agent as provided for in Chapter 608, Florida States (Signature)	nt as registered I statutes accept the

Filing Fee for Application

**Certified Copy (optional)** 

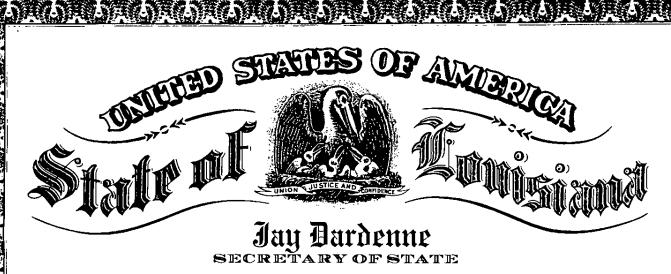
Designation of Registered Agent

**Certificate of Status (optional)** 

\$ 100.00

\$ 25.00

\$ 30.00 \$ 5.00



As Secretary of State, of the State of Louisiana, I do hereby Certify that

the Articles of Organization of

LEGACY LENDING COMPANY OF DESTIN, L.L.C.

Domiciled at MANDEVILLE, LOUISIANA,

Were filed in this Office and a Certificate of Organization was issued on June 13, 2007,

I further certify that no Certificate of Dissolution has been issued.

In testimony whereof, I have hereunto set my hand and caused the Seat of my Office to be affixed at the City of Baton Rouge on, November 7, 2007

ABA 36472714K

Secretary of State

