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A ZOOT NOV 28 P 5: 14 SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: CREDIT SOLUTIONS, L.L.C. dba CREDIT SOLUTIONS OF LOUISIANA, L.L.C. (Name of Limited Liability Company)	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida	in
Please return all correspondence concerning this matter to the following:	
SUZANNE MIDDLETON	
(Name of Person)	
CREDIT SOLUTIONS, L.L.C.	
(Firm/Company)	
(Firm/Company) ALLAHASSINOV 28 3619 18th STREET (Address)	
(Address)	
METAIRIE, LA 70002	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
SUZANNE MIDDLETON at (504) 885-5774	
(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: \$\sumsymbol{I}\$\$125.00 Filing Fee \$\sumsymbol{\sumsy	ру

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that	t we are the Mana	gers and/or Managing
Members of CREDIT SOLUTION	DNS, L.L.C.	
(Name of Limit	ed Liability Company)	
a limited liability company duly organized	and existing unde	r the laws of
LOUISIANA	_	
(State or Country of Organization)	 ·	
Because the name of this foreign limited lia	ability company de	oes not satisfy the
requirements of the s. 608.406, F.S., the lin	nited liability com	pany hereby adopts the
following name to transact business in the	state of Florida:	
CREDIT SOLUTIONS OF	LOUISIAN	A, L.L.C.
(Name to be used by limited liability company in Florida. Company, L.L.C., or LL.C.)	NOTE: Name must en	d with Limited Liability
Date: 11/27/2007		2001 SEC
Signature(s) of Manager(s) and/or Managir	ng Member(s):	2001 NOV :
Ch War	.,	28 F 28 F ARY OF SSEE.
THOMAS D'ANGELO, Manager	,	FLOR STA
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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:

Typed or printed name of signee

SUZANNE MIDDLÉTON, C.F.O.

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:			
CREDIT SOLUTIONS, L.L.C.			
If name unavailable, the alternate name to be used in the state of Florida is:			
CREDIT SOLUTIONS OF LOUISIANA, L.L.C.			
2. The name and the Florida street address of the registered agent and office are:			
CT CORPORATION SYSTEM	TALL SEC	7007	
(Name)	ECRETA JAHA	7001 NOV	-

CICORPORATIO	IN SYSTEM			
	(Nanc)	AAC AAC	NON	623
		TAR	=	e n
1200 SOUTH PINI	E ISLAND ROAD	SEA SEA	28	
Florida Street Address (P.O. Box NOT ACCEPTABLE)			-177	Î
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PLANTATION	FL 33324	SE SE	نن	•
	City/State/Zip		<u></u>	
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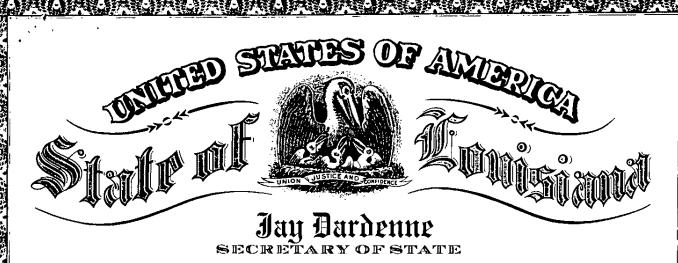
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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.

Stephanie Allison

(Signaluro) Stephanie Allison

Assistant Secretary

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



As Secretary of State, of the State of Louisiana, I do hereby Certify that CREDIT SOLUTIONS, L.L.C.

A limited liability company domiciled in METAIRIE, LOUISIANA,

Filed charter and qualified to do business in this State on January 08, 1998,

I further certify that the records of this Office indicate the company has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned, is in good standing and is authorized to do business in this State.

I further certify that this certificate is not intended to reflect the financial condition of this company since this information is not available from the records of this Office.

In lestimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on, November 19, 2007

BME 34604930K

Secretary of State

