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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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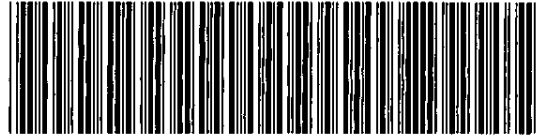
(Business Entity Name)

(Document Number)

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## Corporation Guarantee and Trust Company

TWO GREENWOOD SQUARE, SUITE 110  
3331 STREET ROAD, BENSALEM, PA 19020  
TELEPHONES: (800) 563-6131 • (215) 633-8144  
FAX (215) 633-8160  
E-MAIL: info@cgtco.com

January 14, 2008.

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**RE: BUSINESS CAPITAL GROUP, LLC**

Dear Sir or Madam:

Enclosed is duplicate Application for Registration of the above limited liability company for filing with your office, together with Certificate of Standing and our \$130.00 check to cover filing fees.

Please send your usual acknowledgment and receipt to this office when the filing has been completed. Thank you.

Cordially yours,



Joseph J. Collopy  
Vice-President

JJC/mag

Enclosures

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

**1. BUSINESS CAPITAL GROUP, LLC**

(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 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.")

**2. California**

(Jurisdiction under the law of which foreign limited liability company is organized)

**3. 26-0592270**

(FEI number, if applicable)

**4. 05/23/2007**

(Date of Organization)

**5. perpetual**

(Duration: Year limited liability company will cease to exist or "perpetual")

**6. upon qualification**

(Date first transacted business in Florida, if prior to registration.)  
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

**7. 13902 Harbor Boulevard, Ste 2 C**

**Garden Grove, CA 92843**

(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 follows:**

~~BUSINESS CAPITAL GROUP, LLC~~ **MATT JUDKIN**  
~~13902~~ **13271 Harbor Blvd #A**  
**Garden Grove, CA 92843**

**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:** Business Consulting,  
Business Line of Credit

**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.)

**MATT JUDKIN**

Typed or printed name of signee

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08 JAN 23 PM 12:03  
SECRETARY OF STATE  
ALLAHUSSEIN FLORIDA

**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 CAPITAL GROUP, 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:

EDWIN F. BLANTON

(Name)

810 THOMASVILLE ROAD

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

TALLAHASSEE

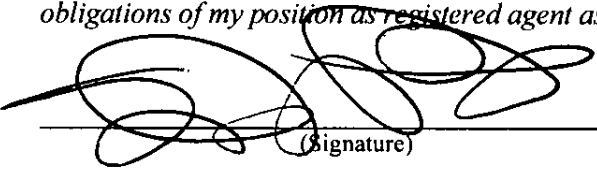
FL

32303

City/State/Zip

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TALLAHASSEE FLORIDA

*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)

**State of California**  
**Secretary of State**

**CERTIFICATE OF GOOD STANDING**  
**CALIFORNIA LIMITED LIABILITY COMPANY**

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

That on the **23rd day of May, 2007, BUSINESS CAPITAL GROUP, LLC**, became recognized under the laws of the State of California by filing its Articles of Organization in this office; and

That according to the records of this office, the said limited liability company is authorized to exercise all its powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition of this limited liability company.

IN WITNESS WHEREOF, I execute this  
certificate and affix the Great Seal  
of the State of California this day  
of January 10, 2008.



*Debra Bowen*

**DEBRA BOWEN**  
**Secretary of State**