M08000002598

(Red	questor's Name)	
(Add	dress)	
(Add	lress)	
(City	//State/Zip/Phone	e #)
PłCK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nam	ne)
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to F	filing Officer:	

Office Use Only



000130523780

06/02/08--01039--015 **155.00

OR HIN -2 PH 4: 25

J. BRYAN

JUN - 3 2008

EXAMINER

COVER LETTER

Division of Corporations		
SUBJECT: AL Interstate First Finar (Name of Limit	ncial, L.L.C.	
The enclosed "Application by Foreign Limited Liab Florida," Certificate of Existence, and check are su liability company to transact business in Florida		
Please return all correspondence concerning this m	atter to the following:	
R, Nathan Hightower		
	me of Person)	
(Fire	m/Company)	. SELVIEI
2536 Countryside Blvd	6th flr	SK TAR
	(Address)	ORPC CORPC
Clearwater FL 33763 (City/Sta	ate and Zip Code)	SECRETARY OF STATE SECRETARY OF STATE OR JUN -2 PH 4: 25
For further information concerning this matter, plea	ase call:	
R. Nathan Hightower (Name of Person)	at (727) 726-0726 (Area Code & Daytime Telephone Numb	er)
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: \$\Bigsim \\$125.00 \text{ Filing Fee} \Bigsim \\$130.00 \text{ Filing Fee & Certificate of \$\frac{1}{2}\$.		Certificate Certified Copy

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 RUSINESS IN THE STATE OF FLORIDA

1. AL Interstate First Financia (Name of Foreign Limited Liability Company; 1)		or "LLC.")
(If name unavailable, enter alternate name adopted for consent of the managers or managing members adopting Company," "L.L.C.," "LLC.")		
2. Delaware (Jurisdiction under the law of which foreign limited company is organized)	liability 3. 26-1273825 (FEI number, if applicable)
4. July 30, 2007 (Date of Organization)	5. Perpetual (Duration: Year limited liability comparexist or "perpetual")	y will cease to
	ness in Florida, if prior to registration.) 8.502 F.S. to determine penalty liability)	OB JUN -2
7. 2536 Countryside Blvd 6th	Flr	المسم المسر المراث
Clearwater FL 33763	t Address of Principal Office)	PR 97 97 97 97 97 97 97 97 97 97 97 97 97
8. If limited liability company is a manager-n9. The name and usual business addresses of	nanaged company, check here	
10. Attached is an original certificate of existence, no monthe jurisdiction under the law of which it is organized. (A translation of the certificate under oath of the translator multiple.) 11. Nature of business or purposes to be conducted.	photocopy is not acceptable. If the certificate is in a fore	

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:		
AL Interstate First Financial, L.L.C.	<u>-</u>	_
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:		
R. Nathan Hightower	- NUL 80	SECRETA SECRETA SECRETA
2536 Countryside Blvd. 6th Flr Florida Street Address (P.O. Box NOT ACCEPTABLE)	-2 PH 4:	ARY OF STU
Clearwater FL 33763 FL City/State/Zip	: 25	ATIONS

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)

PAGE 1

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AL INTERSTATE FIRST FINANCIAL, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-NINTH DAY OF MAY, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AL INTERSTATE FIRST FINANCIAL, LLC" WAS FORMED ON THE THIRTIETH DAY OF JULY, A.D. 2007.

SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 JUN -2 PM 1: 25



Darriet Smith Hindson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6623578

DATE: 05-29-08

4397959 8300 080630067