m10000001893

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status

Special Instructions to Filipa Officer. UNT

WINDER 27 2010

EXAMINER

Office Use Only



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2010 APR 23 PM 2: 25
SECRETARY OF STATE
TALL AHASSEF FINANCE

-



Via FedEx: 7985 3003 9873

Division of Corporations Registration Section Clifton Building 2661 W Executive Center Cir Tallahassee, FL 32301 April 1, 2010

Re: Correction Request as to Oliphant Financial Group, LLC

Filing Number- L10000024249

To Whom it Concern,

Please be advised that Oliphant Financial Group, LLC a limited liability company formed in the state of Delaware inadvertently filed an application for articles of organization with the Division of Corporations of the State of Florida on 03/03/2010. This is a mistake that we just discovered yesterday. We intended to file a "Foreign Limited Liability Company Authorization to Transact Business" in Florida application.

To correct this error, please find enclosed a completed application with the filing fee of \$125.00 and Certificate of Good Standing from the Secretary of State of Delaware. We respectfully ask that your office disregard the initial filing No. L10000024249 filed on March 03, 2010.

Please contact me directly should you have any questions. I can be reached directly via telephone at 941,656-1451 or e-mail at legal@oliphantfinancial.com.

Sincere

Robert A. Morris

President



April 5, 2010

ROBERT A MORRIS 9009 TOWN CENTER PARKWAY LAKEWOOD RANCH, FL 34202

SUBJECT: OLIPHANT FINANCIAL GROUP, LLC

Ref. Number: W10000016611

We have received your document for OLIPHANT FINANCIAL 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 Florida filing you filed in March must be dissolved before we can register it as a Foreign entity.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 010A00008298

COVER LETTER

	egistration Section ivision of Corporations	
SUBJECT		
	Name of Limited Liability Company	
	ed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," and check are submitted to register the above referenced foreign limited liability company to transact business.	
Please retu	rn all correspondence concerning this matter to the following:	
	TATIANA QUINONES	
	Name of Person	
	OLIPHANT FINANCIAL GROUP, LLC	
	Firm/Company	77
	9009 TOWN CENTER PARKWAT	**************************************
	Address STA	
	LAKEWOOD RANCH, FL 34202 다 맛	J
	City/State and Zip Code	
	LEGAL@OLIPHANTFINANCIAL.COM	
	E-mail address: (to be used for future annual report notification)	
For further	information concerning this matter, please call:	
	TATIANA QUINONES at (941) 556-1451	
	Name of Person Area Code & Daytime Telephone Number	
Di Re P.0	AILING ADDRESS: vision of Corporations gistration Section D. Box 6327 Illahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed	is a check for the following amount:	
	\$125.00 Filing Fee \$130.00 Filing Fee \$ \$155.00 Filing Fee \$ \$160.00 Filing Fee, Certificate of Status Certified Copy of Status & Certified	

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:

	OLIPHANT FINANCIAL GROUP, LLC
	OLIPHANT FINANCIAL GROUP, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
col	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written sent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability npany," "L.L.C," "LLC.")
,	DELAWARE 3 26-4720863
ر. ا	DELAWARE Jurisdiction under the law of which foreign limited liability ompany is organized) 3. 26-4720863 (FEI number, if applicable)
4.	04/22/2009 5. PERPETUAL (Date of Organization) [Duration: Year limited liability company will cease to
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
5.	N/A
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 9009 TOWN CENTER PARKWAY LAKEWOOD RANCH, FL 34202
7.	9009 TOWN CENTER PARKWAY LAKEWOOD RANCH, FL 34202
	(Street Address of Principal Office)
8.	(Street Address of Principal Office) (Street Address of Principal Office) If limited liability company is a manager-managed company, check here
€.	The name and usual business addresses of the managing members or managers are as follows:
	OLIPHANT FINANCIAL, LLC
	9009 TOWN CENTER PARKWAY LAKEWOOD RANCH, FL 34202
he	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in urisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a slation of the certificate under oath of the translator must be submitted.)
1	Nature of business or purposes to be conducted or promoted in Florida: DEBT BUYING
	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.) ROBERT A MORRIS
	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:		
OLIPHANT FINANCIAL GROUP; LLC		
If unavailable, the alternate to be used in the state of Florida is:		
2. The name and the Florida street address of the registered agent and office are:	2010 TAL	
BUSINESS FILINGS INCORPORATED	2010 APR	VALUE OF THE PARTY
(Name)	23 488E	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
1203 GOVERNORS SQUARE BLVD, SUITE 101	7	(
Florida Street Address (P.O. Box NOT ACCEPTABLE)	2: 25	**************************************
TALLAHASSEE, 原址 32301-2960 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.

MM Usm Asst Sec for Business Filings Incorporated (Signature)

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

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "OLIPHANT FINANCIAL GROUP, 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-FIFTH DAY OF FEBRUARY, A.D.

2010.

4678862 8300

100209470

AUTHENTICATION: 7836478

DATE: 02-25-10

You may verify this certificate online at corp.delaware.gov/authver.shtml