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SECRETARY OF STATE
AUASSEE FI ORIDA

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:		CHMENT SOLUTIONS LLC				
	Na	me of Limited Liability Company				
The enclosed "Ay Existence, and ch	pplication by Foreign Limited Lia neck are submitted to register the a	bility Company for Authorization to Transact Business in Florida," Certificate of above referenced foreign limited liability company to transact business in Florida				
Please return all	correspondence concerning this m	atter to the following:				
		ROXANNE HURLBURT				
	Name of Person					
EQUITY ENRICHMENT SOLUTIONS LLC						
	Firm/Company					
	4350 OAKES ROAD #516					
•	Address					
	DAVIE, FL 33314					
	City/State and Zip Code					
_	ro	oxanneh@equityes.com				
	E-mail address: (to be used for future annual report notification)				
For further inform	nation concerning this matter, plea	se call:				
	Roxanne Hurlburt	at (954) 791-6062				
	Name of Person	Area Code & Daytime Telephone Number				
Division Registrat P.O. Box	NG ADDRESS: of Corporations tion Section x 6327 see, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle				
_	check for the following amou 00 Filing Fee \$130.00 Filin Certificate o	g Fee & \$\bigsim \\$155.00 \text{ Filing Fee & \$\bigsim \\$160.00 \text{ Filing Fee, Certificate}\$				

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:

1		•		.," or "LLC.")
conse	ne unavailable, enter alternate name adopted for nt of the managers or managing members adopting any," "L.L.C," "LLC.")	the purpose of trans	acting business in Florida and a c. The alternate name must inclu	attach a copy of the written ude "Limited Liability
2	DELAWARE	3	27-3044047	
(Jui con	isdiction under the law of which foreign limited ipany is organized)	liability	(FEI number, if applica	ble)
4.	JULY 13, 2010	5.	PERPETUAL	
	(Date of Organization)	(Dura exist o	tion: Year limited liability comp or "perpetual")	pany will cease to
r Jl	JLY 13, 2010			
·· —	(Date first transacted busing	ness in Florida, if pri	or to registration.)	17 S 6
7. 43	350 OAKES ROAD #516		,	AUG CHIE
	AV/IE El 22214			27 ASS
<u> </u>	AVIE, FL 33314 (Street	Address of Principa	al Office)	
8. If	limited liability company is a manager-m	nanaged company	y, check here	3: 20 STATE FLORID
7. Th	e name and usual business addresses of t	he managing me	mbers or managers are as	follows:
F	ICHARD E. HUFF, SR 4350 OAKE	S ROAD #516,	DAVIE, FL 33314	
_			· · · · · · · · · · · · · · · · · · ·	
_				
he juri		photocopy is not acco		
11. N	fature of business or purposes to be condu	ucted or promote	d in Florida:	
	FUNDING SOL	AWARE of which foreign limited liability 3, 2010 ganization) 5. PERPETUAL (Duration: Year limited liability company will cease to exist or "perpetual") Date first transacted business in Florida, if prior to registration.) be sections 608.501 & 608.502 F.S. to determine penalty liability) 0 #516 (Street Address of Principal Office) mpany is a manager-managed company, check here usiness addresses of the managing members or managers are as follows: F, SR 4350 OAKES ROAD #516, DAVIE, FL 33314 ficate of existence, no more than 90 days old, duly authenticated by the official having custody of records in fwhich it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a		
	du	with!	Se,	
				- r.
	BIC	HARDE HUE	= SR	

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:	
EQUITY ENRICHMENT SOLUTIONS 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:	
ROXANNE HURLBURT	
(Name)	SECTION ACCORDED
4350 OAKES ROAD #516	型 52
Florida Street Address (P.O. Box NOT ACCEPTABLE)	FILED 6 27 PH 3: 20 ENARY OF STATA ANASSEE, FLORE
DAVIE, FLF33314	프SS 😘
City/State/Zip	20 ATE ARIDA
Having been named as registered agent and to accept service of process for the above staliability company at the place designated in this certificate, I hereby accept the appointment 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 Staliability (Signature)	ent as registered ll statutes l accept the

\$ 100.00 Filing Fee for Application

\$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

\$ 25.00 Designation of Registered Agent

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "EQUITY ENRICHMENT SOLUTIONS 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-SIXTH DAY OF JULY, A.D. 2010.

4847283 8300

100752689

AUTHENT CATION: 8134947

DATE: 07-26-10

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