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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ADVENT FINANCIAL SERVICES, LLC  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Julia Connely, Paralegal  
Name of Person

Advent Financial Services, LLC  
Firm/Company

2114 Central Street, Suite 600  
Address

Kansas City, MO 64108  
City/State and Zip Code

jconnely@novastarfinancial.com  
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Julia Connely at ( 816 ) 237-7375  
Name of Person Area Code & Daytime Telephone Number

**MAILING ADDRESS:**  
Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, 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 & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

**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. ADVENT FINANCIAL SERVICES, 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. Delaware 3. 13-3036745  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 07/14/2008 5. perpetual  
(Date of Organization) (Duration: Year limited liability company will come to exist or "perpetual")

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

7. 2114 Central Street, Suite 600  
Kansas City, MO 64108  
(Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here ☒

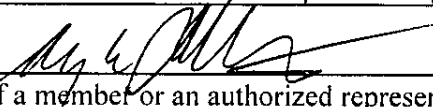
9. The name and usual business addresses of the managing members or managers are as follows:

See attachment.

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: \_\_\_\_\_

Financial transactions processing.

  
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 )

Rodney Schwatken, CFO/Treasurer

Typed or printed name of signee

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TALLAHASSEE, FLORIDA

## Advent Financial Services, LLC

### NAME AND ADDRESS OF EACH MEMBER

NAME NovaStar Financial, Inc.	ADDRESS 2114 Central St, Ste 600	CITY AND STATE Kansas City, MO	ZIP CODE 64108
NAME Mark Ernst Family Irrevocable Trust	ADDRESS 444 8 <sup>th</sup> St., NW, #813	CITY AND STATE Washington, DC	ZIP CODE 20004
NAME Bernard M. Wilson Revocable Trust	ADDRESS 1800 Baltimore, Ste 500	CITY AND STATE Kansas City, MO	ZIP CODE 64108
NAME John W. Thompson	ADDRESS 1800 Baltimore, Ste 500	CITY AND STATE Kansas City, MO	ZIP CODE 64108
NAME Bernard E. Amyot Revocable Trust	ADDRESS 1800 Baltimore, Ste 500	CITY AND STATE Kansas City, MO	ZIP CODE 64108
NAME John E. Kill	ADDRESS 1800 Baltimore, Ste 500	CITY AND STATE Kansas City, MO	ZIP CODE 64108
NAME Kevin N. Harris	ADDRESS 1800 Baltimore, Ste 500	CITY AND STATE Kansas City, MO	ZIP CODE 64108

### NAME AND ADDRESS OF ANY MANAGER OR MANAGERS

NAME W. Lance Anderson	ADDRESS 2114 Central St, Ste 600	CITY AND STATE Kansas City, MO	ZIP CODE 64108
NAME Rodney E. Schwatken	ADDRESS 2114 Central St, Ste 600	CITY AND STATE Kansas City, MO	ZIP CODE 64108
NAME Bernard M. Wilson	ADDRESS 1800 Baltimore, Ste 500	CITY AND STATE Kansas City, MO	ZIP CODE 64108
NAME John W. Thompson	ADDRESS 1800 Baltimore, Ste 500	CITY AND STATE Kansas City, MO	ZIP CODE 64108
NAME Allen R. Ernst	ADDRESS P.O. Box 1307	CITY AND STATE Dubuque, IA	ZIP CODE 52004

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 JACOB A. HASSELT

**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:

ADVENT FINANCIAL SERVICES, 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:

Corporation Service Company

(Name)

1201 Hays Street

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

Tallahassee

FL 32301

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.*

Corporation Service Company

BY Janet Budhu

(Signature)

Janet Budhu, Asst. Vice President

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

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# Delaware

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*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ADVENT FINANCIAL SERVICES, 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 THIRTIETH DAY OF JULY, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ADVENT FINANCIAL SERVICES, LLC" WAS FORMED ON THE FOURTEENTH DAY OF JULY, A.D. 2008.

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

4574765 8300

100787076



You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 8143646

DATE: 07-30-10