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SEP -7 2011

EXAMINER

SUMMERS COMPTON WELLS

PROFESSIONAL CORPORATION
ATTORNEYS AT LAW

WWW.SUMMERSCOMPTONWELLS.COM

*ILLINOIS OFFICE:
2220 S. STATE HWY 157, STE. 200.
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Direct Phone: 314-872-0350 Direct Fax: 314-872-0324 egillen@summerscomptonwells.com

August 31, 2011

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

MAIN OFFICE:

(314)991-4999

FAX: (314)991-2413

8909 LADUE ROAD .

ST. LOUIS, MISSOURI 63124

Re: NexSpring Group, LLC

Our File Number: 84590-2

To Whom It May Concern:

Enclosed please find a Cover Letter, Application By Foreign Limited Liability Company for Authorization to Transact Business in Florida and the Certificate of Designation of Registered Agent/Registered Office, in duplicate for filing, for the above referenced company along with a check made payable to "Secretary of State" in the amount of \$125.00 for filing fees.

Please return the filed Registration to the undersigned. If you have any questions please call me before returning the documents.

Very truly yours,

Ellen M. Gillen Corporate Paralegal

Enclosures 1099471 1.DOC

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: NexSpring Group, 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:				
Ellen Gillen				
Name of Person				
Summers Compton Wells PC				
Firm/Company				
8909 Ladue Road				
Address				
St. Louis, MO 63124				
City/State and Zip Code				
egillen@summerscomptonwells.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Ellen Gillen at (314) 991-4999				
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: \$\sigma \frac{125.00}{125.00}\$ \text{ Filing Fee} \text{ \$\sigma \frac{130.00}{130.00}\$ \text{ Filing Fee & Certificate of Status} \text{ \$\sigma \frac{155.00}{130.00}\$ \text{ Filing Fee & Certificate of Status} \text{ \$\sigma \frac{160.00}{130.00}\$ \text{ Filing Fee, Certificate of Status} \text{ \$\sigma \frac{160.00}{130.00}\$ \text{ Filing Fee, Certificate of Status} \text{ \$\sigma \frac{160.00}{130.00}\$ \text{ Filing Fee, Certificate of Status} \text{ \$\sigma \frac{160.00}{130.00}\$ \text{ Filing Fee, Certificate of Status} \text{ \$\sigma \frac{160.00}{130.00}\$ \text{ Filing Fee, Certificate of Status} \text{ \$\sigma \frac{160.00}{130.00}\$ \text{ Filing Fee, Certificate of Status} \text{ \$\sigma \frac{160.00}{130.00}\$ \text{ Filing Fee, Certificate of Status} \text{ \$\sigma \frac{160.00}{130.00}\$ \text{ Filing Fee, Certificate of Status} \text{ \$\sigma \frac{160.00}{130.00}\$ \text{ Filing Fee, Certificate of Status} \text{ \$\sigma \frac{160.00}{130.00}\$ \text{ Filing Fee, Certificate of Status} \text{ \$\sigma \frac{160.00}{130.00}\$ \text{ Filing Fee, Certificate of Status} \text{ \$\sigma \frac{160.00}{130.00}\$ \text{ Filing Fee, Certificate of Status} \text{ \$\sigma \frac{160.00}{130.00}\$ \text{ Filing Fee, Certificate of Status} \text{ \$\sigma \frac{160.00}{130.00}\$ \$\sigma \frac{160.				

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. NexSpring Group, LLC (Name of Foreign Limited Liability Company; must inclu	de "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the alter Company," "L.L.C," "LLC.")	se of transacting business in Florida and attach a copy of the writte rnate name. The alternate name must include "Limited Liability
Delaware (Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
	perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
_{6.} n/a	
(Date first transacted business in Flo (See sections 608.501 & 608.502 F.S.	orida, if prior to registration.) to determine penalty liability)
7. 10805 Sunset Office Suites, Suite 300	CCRE SE
St. Louis, MO 63127	ASSE ASSE
8. If limited liability company is a manager-managed 9. The name and usual business addresses of the manager	ARE BO
Richard G. Thornberry	
10805 Sunset Office Suites, Suite 300	
St. Louis, MO 63127	
the jurisdiction under the law of which it is organized. (A photocopy translation of the certificate under oath of the translator must be subn	nitted.)
 Nature of business or purposes to be conducted or and other services to and engage in bus 	promoted in Florida: to provide consulting iness in the financial services industry
1000	managen
	thorized representative of a member.
(in accordance with section out.405(3), r.S., the exect	ution of this document constitutes an affirmation under the

Typed or printed name of signee

Richard G. Thornberry

penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

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 Compar	ny is:		
NexSpr	ring Group, LLC		
If unavailable, the alternate to be used in the	state of Florida i	s:	
2. The name and the Florida street address of	f the registered a		2011 SEP SECRE
	(Name)		SEP-6 I
	ast Park Avenue		- FF 3 -
Florida Street Addre	ss (P.O. Box <u>NOT</u>	, ACCEPTABLE)	1:00 STATE LORIDA
Tallahassee	FL	32301	A
	City/State/Zin		

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)

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "NEXSPRING 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-SECOND DAY OF AUGUST, A.D. 2011.

4266639 8300

110929891

AUTHENTY CATION: 8982744

DATE: 08-22-11

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