

M11000005256

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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W110000.52109

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C BRUCE

OCT 20 2011

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 10, 2011

JESSICA LONGORIA  
8333 DOUGLAS AVENUE STE 950  
DALLAS, TX 75225

SUBJECT: CFAM CREDIT SOLUTIONS LLC  
Ref. Number: W11000052109

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TALLAHASSEE, FLORIDA

We have received your document for CFAM CREDIT SOLUTIONS LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6984.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 211A00023247

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CFAM Credit Solutions 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:

Jessica Longoria  
Name of Person

CFAM  
Firm/Company

8333 Douglas Avenue Ste 950  
Address

Dallas, TX 75225  
City/State and Zip Code

jlongoria@cfamllc.com  
E-mail address. (to be used for future annual report notification)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Jessica Longoria at (214) 616-7083  
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. CFAM Credit Solutions LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

CFAM CREDIT SOLUTIONS  
(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. TEXAS 3. 45-3445593  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 9-14-2011 5. Perpetual  
(Date of Organization) (Duration: Year limited liability company was created or "perpetual")

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

7. 8333 Douglas Avenue Ste 950 Dallas TX 75225  
(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:

Paul Jackson-MGRM

8333 DOUGLAS AVE. STE 950 DALLAS, TX 75225

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: CREDIT

REPAIR SERVICES

Paul Jackson  
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. 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.)

Paul Jackson  
Typed or printed name of signee

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TALLAHASSEE, FLORIDA

**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:

CEAM CREDIT SOLUTIONS, LLC

If unavailable, the alternate to be used in the state of Florida is:

CEAM CREDIT SOLUTIONS

2. The name and the Florida street address of the registered agent and office are:

NRAI Services, Inc.  
(Name)

515 East Park Avenue

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

Tallahassee

FL

32301

City/State/Zip

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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*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.*

NRAI Services, Inc.

By: Amy Purdy  
(Signature)

Amy Purdy, Assistant Secretary

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

Corporations Section  
P.O. Box 13697  
Austin, Texas 78711-3697



Hope Andrade  
Secretary of State

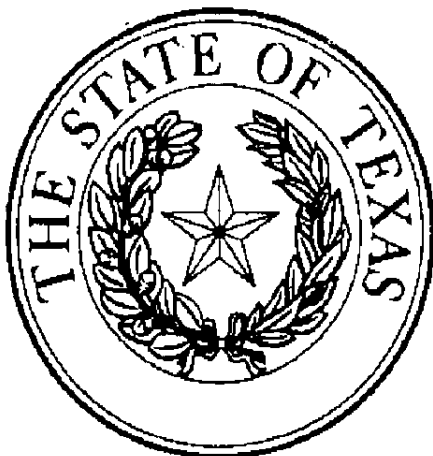
## Office of the Secretary of State

### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for CFAM Credit Solutions, LLC (file number 801480371), a Domestic Limited Liability Company (LLC), was filed in this office on September 14, 2011.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on October 14, 2011.



A handwritten signature in cursive script, reading "Hope Andrade".

Hope Andrade  
Secretary of State