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**EXAMINER** 



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SECRETARY OF STATES STATES

#### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Arcadica Home Loans, LLC  Name of Limited Liability Company  The analoged "Application by Ferrica Limited Liability Company" (Application by Ferrica Limited Liability Company)
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Existence, and check are submitted to register the above referenced foreign limited liability company to transact business.
Please return all correspondence concerning this matter to the following:
Darrin Varder Ark Name of Person
Arcadia Home Loans, LLC Firm/Company
0-185 44th Street SW. Suite 3 Address
Corandville M1 49418  City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Darrin Varder Ark  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:  \$\int\\$\$125.00 \text{ Filing Fee}\$  Certificate of Status  \$\int\\$\$155.00 \text{ Filing Fee & Certificate Copy}\$  \$\$160.00 \text{ Filing Fee, Certificate of Status & Certified Copy}\$

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608303, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:  1
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writte consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
2. Michigan (Jurisdiction under the law of which foreign limited liability company is organized)  3. U5-483166 (FEI number, if applicable)
4. 3-19-12 (Date of Organization)  5. Percetual (Duration! Year limited liability company will cease to exist or "perpetual")
6(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)  7. O-195 YYTH Street SAL Suite 3
7. D-185 YYTH Street SN. Suite 3
Grandville, M. 49418 (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:
Darrin Vander Ark
0-185 44th Street SW
_ Grandville MI 49418
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: Mortgage Lending
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.)
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:	
Arcadia None Loans, LLC	
It 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:	<u></u>
LRAI Services Inc. (Name)	
Florida Street Address (P.O. Box NOT ACCEPT MRTE)	
Tallabassie II 32301 City State Zip	

Having been named as registered agent and to accept service of process for the above stated limited fiability 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.

Matt Thompson, Assistant Secretary
(Signature)

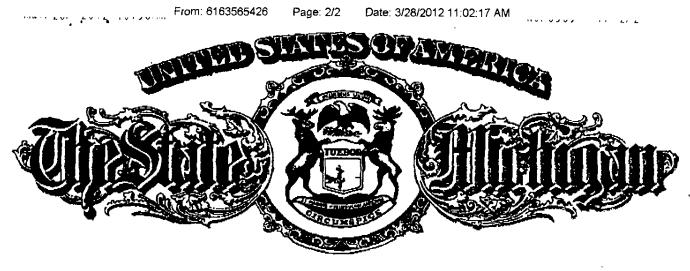
\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

### 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:
Arcadia Home Loans, 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:
NRAI Services, Inc. (Name)
515 East Park Avenue 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.
(Signature)
\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent

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



### Department of Licensing and Regulatory Affairs Lensing, Michigan

This is to Certify That

#### ARCADIA HOME LOANS, LLC

was validly organized on March 19, 2012 as a Limited Liability Company. Said Limited Liability Company is validly in existence under the laws of this state and has satisfied its annual filing obligations.

This certificate is issued pursuant to the provisions of 1993 PA 23, as amended, to attest to the fact that the company is in good standing in Michigan as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



Sent by Facsimile Transmission D7338G

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 28th day of March, 2012

Bureau of Commercial Services