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12 SEP 27 PH 3: 02 SECRETARY OF STATE ALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: MRN cubed, LLC	of Limited Liability Company
Name	of Limited Liability Company
	ity Company for Authorization to Transact Business in Florida," Certificate of ve referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter	er to the following:
Linda Stauffer	
	Name of Person
NRAI Corporate Services	
	Firm/Company
1021 Main Street, Suite 1	150
1024 1110111 01/001, 04/10 1	Address
Houston, Texas 77002	
	City/State and Zip Code
mls2011@clear.net	
	be used for future annual report notification)
For further information concerning this matter, please	calls
To turtier information concerning this matter, prease	Can.
Linda Stauffer	at (800) 862-5438
Name of Person	Area Code & Daytime Telephone Number
MAILING ADDRESS:	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	

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. MRN cubed, LLC		
(Name of Foreign Limited Liability Company; n	must include "Limited Liability Company," "L.L.C.," or "LLC.")	
(If name unavailable, enter alternate name adopted for consent of the managers or managing members adopting Company," "L.L.C," "LLC.")	the purpose of transacting business in Florida and attach a copy of ig the alternate name. The alternate name must include "Limited L	f the writte
_{2.} Texas	3, 260683024	
(Jurisdiction under the law of which foreign limited l company is organized)	liability (FEI number, if applicable)	
4. August 3, 2007	_{5.} perpetual	
(Date of Organization)	(Duration: Year limited liability company will cease exist or "perpetual")	to
6		
(Date first transacted busin (See sections 608.501 & 608	ness in Florida, if prior to registration.) 3.502 F.S. to determine penalty liability)	
7. 6136 Frisco Square Blvd., Suite 40	00, Frisco, TX 75034	
(Street	Address of Principal Office)	
B. If limited liability company is a manager-m	·	
	gov company, choose hore [e]	
2. The name and usual business addresses of t	the managing members or managers are as follows:	
Paul Anselmo, 6136 Frisco Square B	lvd., Suite 400, Frisco, TX 75034	
Attached is an original certificate of existence, no more	than 90 days old, duly authenticated by the official having custody of	 frecords in
	photocopy is not acceptable. If the certificate is in a foreign language.	
ranslation of the certificate under oath of the translator mus	st be submitted.)))
1. Nature of business or purposes to be condu		J
Mortgage industry outsource provid	ler.	
		, O
_	or an authorized representative of a member. $\frac{\mathbb{Z}}{\mathbb{Z}}$	
	, the execution of this document constitutes an affirmation uniter the	
	ein are true. I am aware that any false information submitted in a constitutes a third degree felony as provided for in s.817.155, F.S.)	
Paul Anselmo, Man	- · · · · · · · · · · · · · · · · · · ·	
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.

	the Limited Liability Company is:
MRN cube	d, LLC
If unavailable, th	ne alternate to be used in the state of Florida is:
2. The name and	d the Florida street address of the registered agent and office are:
1	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.

By: (Signature)

Linda Stauffer, 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



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 MRN cubed, LLC (file number 800853409), a Domestic Limited Liability Company (LLC), was filed in this office on August 03, 2007.

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 July 27, 2012.



Phone: (512) 463-5555

Prepared by: SOS-WEB

Hope Andrade Secretary of State