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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER

DEC -7 2012

**RAzOR Capital, LLC**  
**8000 Norman Ctr. Dr., Suite 860**  
**Bloomington, MN 55437**

State of Florida  
FL Reg Section Division of Corporations  
2661 Executive Center Circle Clifton Building  
Tallahassee, FL 32301

**RE: RAzOR Capital, LLC**

To Whom It May Concern:

Enclosed you will find our completed application.

Please mail all correspondence to:

Brie Jenkins  
RAzOR Capital, LLC  
8000 Norman Ctr. Dr., Suite 860  
Bloomington, MN

If you have any questions regarding this application, please contact:

Brie Jenkins  
RAzOR Capital, LLC  
Phone: (952) 345-0061  
Fax: (952) 746-4262  
Email: [brie.jenkins@razor-capital.com](mailto:brie.jenkins@razor-capital.com)

Enclosures

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** RAzOR Capital, 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:

Christopher Winkler

Name of Person

RAzOR Capital, LLC

Firm/Company

8000 Norman Ctr. Dr., Suite 860

Address

Bloomington, MN 55437

City/State and Zip Code

chris.winkler@razor-capital.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christopher Winkler

Name of Person

at ( 612 )

Area Code & Daytime Telephone Number

284-5787

**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. RAZOR Capital, 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. Minnesota 3. 26-3571850  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 10/10/2008 5. Perpetual  
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

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

7. 8000 Norman Ctr. Dr., Suite 860, Bloomington, MN 55437  
(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:

Christopher Winkler, 8000 Norman Ctr. Dr., Suite 860, Bloomington, MN 55437

Robert Johnson, 8000 Norman Ctr. Dr., Suite 860, Bloomington, MN 55437

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: \_\_\_\_\_

Debt Collection and Debt Purchasing

Angela Butera  
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.)

Angela Butera

Typed or printed name of signee

FILED  
12 DEC -6 PM 12:20  
SECRETARY OF STATE  
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:

RAzOR Capital, 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:

C T Corporation System  
(Name)

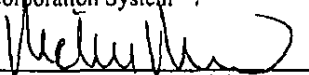
1200 South Pine Island Road  
Florida Street Address (P.O. Box NOT ACCEPTABLE)

Plantation FL 33324  
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.*

C T Corporation System

By:

  
(Signature)

**Michele Miller**

**Assistant Secretary**

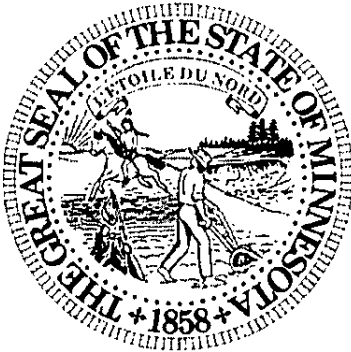
\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

**Office of the Minnesota Secretary of State  
Certificate of Good Standing**

I, Mark Ritchie, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name:	RAzOR Capital, LLC
Date Filed:	10/10/2008
File Number:	3043073-2
Minnesota Statutes, Chapter:	322B
Home Jurisdiction:	Minnesota

This certificate has been issued on: 11/27/2012



*Mark Ritchie*

Mark Ritchie  
Secretary of State  
State of Minnesota

**Collectors Insurance Agency, Inc.**  
**Power of Attorney**

NOTICE IS HEREBY GIVEN THAT RazOR Capital, LLC, ("Entity") an entity organized under the laws of Minnesota, does hereby appoint, Angela Butera, Lisa M. Eubanks, Jeff Schoenberg and Janis St. Martin while employed by Collectors Insurance Agency, Inc. as attorney-in-fact for the entity to act for the entity and affiliates and subsidiaries of the entity attached hereto as Exhibit A, specifically organized herein by reference ("the Subsidiaries") in the Entities' and Subsidiaries' names for the limited purposes authorized herein.

The Entity and Subsidiaries, having taken all necessary steps to authorize the changes, hereby grants it's attorney-in-fact the power to execute the documents necessary to file qualifications, certificates of authority, registrations, business registrations, licenses, permits and forms of similar import on behalf of the Entity and Subsidiaries in any state, jurisdiction, the District of Columbia and Puerto Rico.

This Power of Attorney expires when revoked by the Entity or Affiliates or Subsidiaries.

IN WITNESS WHEREOF, the undersigned have executed this Power of Attorney on the 26<sup>th</sup> day of November, 2012.

  
Signature of Authorized Entity Representative

Brienne Jenkins, Dir of Ops  
Print Name and Title

Sworn to and subscribed before me  
This 26 of November, 2012.

Notary Public, State of MN  
Commission Expires: 12/15

  
Notary Signature

