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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: FundingShield 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:

Keith E.Nance.	
	Name of Person
FundingShield LLC	
A	Firm/Company
1709 Pierce Drive	
	Address
Lake Worth, FL 33460	
	City/State and Zip Code
knance@fundingshiel	d.com
E-mail address: (t	o be used for future annual report notification)
For further information concerning this matter, pleas Keith Nance	se call: at (561) 254-2541
Name of Person	Arca 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 Fce \$130.00 Filing Fe Certificate of State	nt: e & S155.00 Filing Fee & S160.00 Filing Fee, Certificate us Certified Copy of Status & Certified Copy



December 20, 2012

To: Florida Department of state Division of Corporations

RE: FundingShield registration of Foreign LLC

Please mail the certificate to the following address:

1709 Pierce Drive Lake Worth, FL 33460

If you have any further questions, please do not hesitate to contact me at 646-783-3865 or 561-254-2541.

Sincere

Keith Nance 600 FundingShield LLC 44 Wall Street, 4th Floor New York, NY 10005

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 FundingShield 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. New York
- (Jurisdiction under the law of which foreign limited liability company is organized)
 - 5. Perpetual

4. <u>3/29/2010</u> (Date of C

(Date of Organization)

(Duration: Year limited liability company will cease to exist or "perpetual")

(FEI number, if applicable)

6.

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

7. 1709 Pierce Drive, Lake Worth, FL 33460

(Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here \boxed{I}

9. The name and usual business addresses of the managing members or managers are as follows:

Keith Nance 1709 Pierce Drive Lake Worth FL 33460

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:

Loss Mitigation and Third Party Service Provider Validation Services for the Mortgage Industry.

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.)

Keith E. Nance

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:

FundingShield 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:

Keith E. Nance

(Name)

1709 Pierce Drive

Florida Street Address (P.O. Box <u>NOT</u> ACCEPTABLE)

Lake Worth

FL 33460 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 ogree 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.

/	(Signa	ture)	, , , , , , , , , , , , , , , , , , ,	12	er s
	100.00 25.00 30.00 5.00	Filing Fee for Application Designation of Registered Agent Certified Copy (optional) Certificate of Status (optional)	t	DEC 26 PH 2:	ENTETARY OF SUA

State of New York Department of State } ss:

I hereby certify, that FUNDINGSHIELD LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 03/29/2010, and that the Limited Liability Company is existing so far as shown by the records of the Department.

The Biennial Statement is past due.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 07th day of December two thousand and twelve.

First Deputy Secretary of State