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| (Re                                     | equestor's Name)   |             |
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| (Cit                                    | ty/State/Zip/Phone | e #)        |
| PICK-UP                                 | ☐ WAIT             | MAIL        |
| (Bu                                     | ısiness Entity Nar | ne)         |
| (Do                                     | ocument Number)    |             |
| Certified Copies                        | _ Certificates     | s of Status |
| Special Instructions to Filing Officer: |                    |             |
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SEGRETARY OF STATE TALLAHASSEE, FLORIDA

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#### **COVER LETTER**

|                       | stration Section<br>sion of Corporations  |   |  |  |
|-----------------------|---|---|--|--|
| SUBJECT:              | Cherry Creek Strategic Advisors, Ll   | LLC   |  |  |
| SUBJECT.              | N   | Name of Limited Liability Company   |  |  |
|                       |   | Liability Company for Authorization to Transact Business in Florida," Certificate above referenced foreign limited liability company to transact business in Florida. |  |  |
| Please return         | all correspondence concerning this n  | s matter to the following:  |  |  |
|                       | Robert Powell   |   |  |  |
|                       |   | Name of Person  |  |  |
|                       | Collection Licensing, LLC   |   |  |  |
| Firm/Company          |   |   |  |  |
|                       | 1752 S. Lima St.  |   |  |  |
|                       | <del></del>   | Address   |  |  |
|                       | Aurora, CO 80012  |   |  |  |
|                       |   | City/State and Zip Code   |  |  |
|                       | robert@collectionlicensing.com  | n   |  |  |
|                       | E-mail address:   | ss: (to be used for future annual report notification)  |  |  |
| For further in        | formation concerning this matter, ple   | please call:  |  |  |
| Rob                   | ert Powell  | 303 369-1586  |  |  |
|                       | Name of Person  | Area Code & Daytime Telephone Number  |  |  |
| Divis<br>Regi<br>P.O. | sion of Corporations<br>stration Section<br>Box 6327<br>ahassee, FL 32314   | STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301                                     |  |  |
|                       | a check for the following amo<br>125.00 Filing Fee \$\square\$\$\$ \$130.00 Filing Certificate of \$\square\$\$\$\$\$\$\$ | Filing Fee & \$\Bigsquare\$ \$155.00 Filing Fee & \$\Bigsquare\$ \$160.00 Filing Fee, Certificate   |  |  |

FL057N - 12/03/2012 Wolters Khower Only

### 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: Cherry Creek Strategic Advisors, 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," "LI.C.") Wyoming (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) 11/26/2012 Perpetual (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 4380 S. Syracuse Street, Suite 200 Denver, CO 80237 (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: Mark Paulson, 4380 S. Syracuse Street, Suite 200, Denver, CO 80237 Robert Barry, Jr., 4380 S. Syracuse Street, Suite 200, Denver, CO 80237 Scot McCune, 4380 S. Syracuse Street, Suite 200, Denver, CO 80237 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 via interstate means of fax, mail or phone. 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.) Scot McCune

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 Liabilit<br>Cherry Creek Strategic Advisors, LLC | y Company is:                                   |              |
|---|---|--------------|
| If unavailable, the alternate to be us                                      | ed in the state of Florida is:                  |              |
| 2. The name and the Florida street  | address of the registered agent and office arc: |              |
|   | NRAI Services, Inc.                             | 7.013<br>TAL |
|   | (Name)  | 超量型          |
| 515 East Park Avenue  |   | SSE & FI     |
| Florida Street Address (P.O. Box NOT ACCEPTABLE)                            |   |              |
| Tallahassee   | FL 32301  | LORDO L      |
| ,   | 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.

NRAI Services, Inc.

By: Color (Signature)

Char McAdow, Asst. Secretary

\$ 100.00 Filing Fee for Application\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

# State of Wyoming

Office of the Secretary of State



United States of America, State of Wyoming

SS.

I, MAX MAXFIELD, Secretary of State of the State of Wyoming, do hereby certify that according to the records in the office of the Secretary of State of Wyoming, Cherry Creek Strategic Advisors, Inc. A Profit Corporation originally Incorporated in Wyoming under the name Cherry Creek Strategic Advisors, Inc on November 26, 2012, did on December 17, 2012, file a conversion to become a Wyoming Limited Liability Company with perpetual duration.

I FURTHER CERTIFY that this entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to day, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Wyoming. Done at Cheyenne, the Capital, this 3rd day of January A.D., 2013.

Secretary of State

George Guillen, Business Registrar