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COVER LETTER

	egistration Section Division of Corporations		
CUDIECT	Sure Sports Lending, LLC		
SUBJECT		me of Limited Liability Company	
		pility Company for Authorization to Transact Business in Florida," Certific bove referenced foreign limited liability company to transact business in Fl	
Please retur	urn all correspondence concerning this mat	atter to the following:	
	Darren Heitner		
		Name of Person	
	Wolfe Law Miami, P.A.		
		Firm/Company 750 5	7
	175 SW 7 STREET, SUITE	E 2410	II ED
		Address	M
	MIAMI, FLORIDA 33130	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	O
	DHEITNER@WOLFELAW	City/State and Zip Code VMIAMI.COM	,
	E-mail address: (t	(to be used for future annual report notification)	
For further	r information concerning this matter, pleas	ase call:	
L	_eon McKenzie	610 389-4041 at ()	
	Name of Person	Area Code & Daytime Telephone Number	
Di Re P.	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Callahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
	d is a check for the following amounts \$125.00 Filing Fee \$130.00 Filing Certificate of	ng Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate	:

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: Sure Sports Lending, 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.") Pennsylvania 3977385 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 8/20/10 Perpetual (Date of Organization) (Duration: Year limited liability company will cease to 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) 825 B Meadowview Lane Mont Clare, PA 19453 (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: LEON MCKENZIE: 1926 HOLLYWOOD BLVD, SUIT 308, HOLLYWOOD, FL 33020 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.) Provides athletes with 11. Nature of business or purposes to be conducted or promoted in Florida: cost effective, bank originated loans, available to professionals in every other profession. 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

Darren Heitner

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.

	of the Limited Liabil Lending, LLC	lity Company is:	
If unavailable	, the alternate to be ı	used in the state of Florida is:	
2. The name a	and the Florida stree	t address of the registered agent and office are:	TALLAR SECRE
	Wolfe Law Miar	mi, P.A.	To the second se
		(Name)	
	175 SW 7 STR	EET, SUITE 2410	SOLUTION STATES
Florida Street Address (P.O. Box NOT ACCEPTABLE)		— У	
	MIAMI	33130 FL	
		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)

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

JUNE 27, 2013

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

Sure Sports Lending, LLC

Is duly organized as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT, This Subsistence Certificate shall not imply that all fees, taxes, and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

Care ariere

Certification Number: 11171302-1

Verify this certificate online at http://www.corporations.state.pa.us/corp/soskb/verify.asp