## 200004375 7/11/2013 10

#### Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H13000155372 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA00000023 : (850)222-1092 Phone Pax Number : (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\* 20

Email Address:

#### Foreign Limited Liability Company EMERALD FINANCIAL SERVICES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

B. BOSTICK Help

JUL 1 2 2013

**EXAMINER** 

7/11/2013

. CRZE027 (9/10)	COV	er letter		٠
TO: Registration Section Division of Corporation	· •		•	
SUBJECT: Emerald Financial S	Services, LLC			
• .	Name of Lin	ited Liability Company	•	
The enclosed "Application by For Existence, and check are submitted	eign Limited Liability Com d to register the shove refer	pany for Authorization to Tr enced foreign limited liabili	ansact Business in Florida," Certifi y company to transact business in l	cate of Florida
Picase return all correspondence o	concurning this matter to the	following:		
			•	
<del></del>	N1	ime of Person	<del></del> .	
	• • •			
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		•		
		Address .	•	
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	Cin-/Ot	ate and Zip Code		
	City/Si	and and Zap Code		
kbartle@hrblock.	com	•	Zo	
	B-mail address: (to be used	for future annual report not	fication)	<i>ب</i> المار ك
For further information concerning	g this matter, please call:		至是	
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Division of Corporations	Division	n of Corporations	DRID PRID	
Registration Section		tion Section	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	ف
P.O. Box 6327 Tallabassee, FL 32314		Building tecutive Center Circle		
200000000000000000000000000000000000000		1906, FL 32301		
Enclosed is a check for the f	olloudua amount			
□ \$125.00 Filing Fee	DIOWING ENFOURT;	□ \$155.00 Filing Fee &	3160.00 Filing Fee, Certificat	6
- +	Cartificate of Status	Certified Corn	of Status & Cartified Const	-

#### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO Transact business in Florida

	XMPLIANCE WITH SECTION COESIS, FLORIDA STATUTES, THE FULLOWING IS SUBMITTED TO REGISTER A PORTRAS TEDLIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. <u>E</u>	merald Financial Services, LLC (Name of Foreign Limited Liability Company, must include "Limited Liability Company," "LLC.," or "LLC.").
cons	ame unavailable, enter alternate name adopted for the purpose of transacting business in Floride and attach a copy of the written out of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability pany," "LL.C," "LLC.")
2. D	claware 3.
00 ())	risdiction under the law of which foreign limited liability (Fill number, if applicable) upony is organized)
4. <u>9</u>	7/01/2013  5. Perpetual (Date of Organization)  (Described: Year limited liability company will cease to extent or "perpetual")
6. <u>s</u>	Jpon Qualification
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 5	one H&R Block Way, Kansas City, MO 64105
_	
	(Street Address of Prioripal Office)
8. I	(Street Address of Principal Office)
9. I	he name and usual business addresses of the managing members or managers are as follows:
]	H&R Block Bank, One H&R Block Way, Kansas City, MO 54105
-	
-	
the ju turnsl	attached is an original certificate of existence, no more than 90 days old; duly authenticated by the official having custody of records in disdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a fixeign language, a atom of the certificate under onth of the translator must be subtraited.)
	Nature of business or purposes to be conducted or promoted in Florida:
F	nellitate Pinancial Services
	X+1
	Signature of a member of an authorized representative of a member.
	(In accordance with section 608.408(f), F.S., the execution of this document constitutes an affirmation under the pumalities of perjury that the facts stated berein 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 a.817.155, P.S.)
	Typed or printed name of signes
	Taber or benien name of affines /

### 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 name of the Limited Liability Company is:
mornid Financial Services, LLC
'unavailable, the alternate to be used in the state of Florida is:
The name and the Florida street address of the registered agent and office are:
C T Corporation System
(Marne)
(Name)  CT Comporation System (Name)
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Plantation FL 33324
City/State/Zip
aving been named as registered agent and to accept service of process for the above stated limited ability company at the place designated in this certificate, I hereby accept the appointment as gistered agent and agree to act in this capacity. I further agree to comply with the provisions of all antes 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 acutes.  C T Corporation Syram  Kristin Bolden  By:
(Signature) \$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)

5.00 Certificate of Status (optional)

# Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EMERALD FINANCIAL SERVICES, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINTH DAY OF JULY, A.D. 2013.

AND I DO HERBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

2019 JUL 11 AM 8: 19
SECRETARY OF STATE

5357352 8300

130858327

You may porify this certificate online

Joffey W. Bullock, Secretary of State

712E012.00120N. 0571511

DATE: 07-09-13