Division of

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TRIAD PROFESSIONAL SERVICES, LLC

Account Number : 120020000094 Phone : (770)777-2091 Fax Number : (770)220-1943

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

Email Address:

Foreign Limited Liability Company CFI PHOENIX INVESTMENTS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

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COVER LETTER

**	istrution Section sion of Corporations		
SUBJECT:	CFI PHOENIX INVESTMENTS, LL	.c	
	Narr	ne of Limited Liability Company	
The enclosed Existence, and	"Application by Foreign Limited Liahd check are submitted to register the a	oility Company for Authorization to T bove referenced foreign limited liabil	Transact Business in Florida," Certificate of lity company to transact business in Florida
Please return	all correspondence concerning this ma	atter to the following:	
	Sharon K. Gray		
		Name of Person	
	Triad Professional Services, LLC		
		Firm/Company	
1720 Windward Concourse, Ste. 3		390	
		Address	
	Alpharetta, GA 30005		
		City/State and Zip Code	
	dbarksdale@cflanc.com		
	E-mail address:	(to be used for future annual report noti-	fication)
For further int	formation concerning this matter, plea	se call:	
Shar	ron K. Gray	at (770) 777-2	2091
	Name of Contact Person	Area Code I	Daytime Telephone Number
Divis Regis P.O.	LING ADDRESS: sion of Corporations stration Section Box 6327 hassee, Fl. 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, Fl. 32301	
	a check for the following amou 25,00 Filing Fee S130.00 Filin Certificate of	g Fee & 🔼 \$155.00 Filing Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FUREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(If name unavailable, enter electroste name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") 2. Delaware (Juridalelon under the law of which foreign limited liability company is organized) 4. Upon quellification (Date first immasted business in Florida, if prior to registration) (See sections 605.0904 & 605.0905, F.S. to determine pointly liability) 5. 303 Perimeter Center North, Suite 201 Atlanta, GA 30346 (Street Address of Frincipal Office) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: CF Asset Management, LLC 303 Perimeter Center North, Suite 201 Atlanta, GA 30346 8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having outlody 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)	If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited lability Company," "L.L.C." or "LLC." or "LLC.") Delaware 3	1. CFI PHOENIX INVESTMENTS, LLC (Name of Foreign Limited Lability Company; must include "Limited Liability Company," "L.L.C.,"	or UICP		
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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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 Li	ability Comp	any is:			
CFI PHOENIX	INVESTMENTS, L	rc			<u> </u>	
If unavailable	e, the alternate to	be used in the	state of Florida	is:		
2. The name	and the Florida st	treet address o	of the registered	agent and office are:		
	NRAI Services,	Inc.			7.2	#
			(Name)			רד: רד: ני:
	1200 South Pine	Island Road			* * *	ا (د:
	Fi	orida Street Add	iress (P.O. Hox NO	T ACCEPTABLE)	:	٠٠٠٠,
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		\$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Certified Cop	f Registered Agent		

Delaware

PACE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO BEREBY CERTIFY "CFI PHOENIX INVESTMENTS, 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 THIRD DAY OF FEBRUARY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CFI PHOENIX INVESTMENTS, LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF JANUARY, A.D. 2014.

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

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You may verify this certificate online at corp.delaware.gov/authver.shtml

Jeffrey W. Bullock, Secretary of State
AUTHENTY CATION: 1105034

DATE: 02-03-14

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