

M14000002367

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

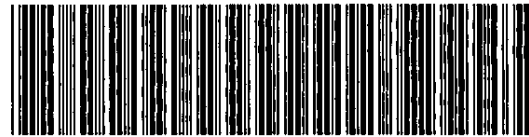
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300257777793

03/17/14--01057--019 \*\*160.00

FILED  
14 APR -7 AM 11:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Stivers APR 09 2014

3521



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 18, 2014

CORNERSTONE SUPPRT, INC  
70 MANSELL CT SUITE 250  
ROSWELL, GA 30076

SUBJECT: PHOENIX FINANCIAL SERVICES LLC  
Ref. Number: W14000017240

We have received your document for PHOENIX FINANCIAL SERVICES LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 614A00005803



## Cornerstone Support, Inc.

Florida Division of Corporations  
New Filing Section/Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

March 13, 2014

Florida Division of Corporations,

Please find enclosed the Certificate of Authority application and fee for Phoenix Financial Services, LLC. **Please note, the enclosed check contains the \$100.00 filing fee, the \$25.00 Designation of Registered Agent fee, the \$30.00 fee for a Certified Copy and the \$5.00 fee for a Certificate of Status.**

Phoenix Financial Services, LLC has hired Cornerstone Support, Inc. to complete this filing on their behalf. I have provided a stamped, self-addressed envelope for return proof of filing.

Please contact me at 770-587-4595 with any questions regarding this filing.

Please mail any correspondence to:  
Cornerstone Support, Inc.  
Attn: Donna Talbott  
70 Mansell Court, Suite 250  
Roswell, GA 30076

### CONFIDENTIALITY NOTICE

This submission and any attachments contain information from Cornerstone Support, Inc. and are intended solely for the use of the named recipient or recipients. This submission may contain privileged or confidential communications. Any dissemination of this submission by anyone other than an intended recipient is strictly prohibited. If you are not a named recipient, you are prohibited from any further viewing of the information or any attachments or from making any use of the information or attachments. If you believe you have received this information in error, notify the sender immediately and permanently destroy the information, any attachments, and all copies thereof.

Sincerely,

Donna Talbott  
Licensing Specialist  
Cornerstone Support, Inc.

70 Mansell Court  
Suite 250

Roswell, Georgia 30076

770.587 4595

Fax 770.587 2440

www.cornerstonesupport.com

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN  
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. Phoenix Financial Services 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. IN 3. 464434876  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 1/6/14 5. Perpetual  
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

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

7. 8902 Otis Avenue, Suite 103A, Indianapolis, IN 46216  
(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:

See Attached List for Additional Members

MGRM Karen Hoeft 8902 Otis Ave., Suite 103A Indianapolis, IN 46216

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 Collections

Kimberly England  
Signature of a member of 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.817.135, F.S.)

Kimberly England

Typed or printed name of signer

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 APR - 7 AM 11:10

FILED

Phoenix Financial Services, LLC  
List of Officers

MGRM

David Andrew Hoeft  
8902 Otis Avenue, Suite 103A  
Indianapolis, IN 46216

MGRM

Kimberly England  
8902 Otis Avenue, Suite 103A  
Indianapolis, IN 46216

MGRM

Chad Dean Edmonson  
8902 Otis Avenue, Suite 103A  
Indianapolis, IN 46216

MGRM

James G. Hefty  
8902 Otis Avenue, Suite 103A  
Indianapolis, IN 46216

FILED  
14 APR - 7 AM 11:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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:

\_\_\_\_\_

If unavailable, the alternate to be used in the state of Florida is:

Phoenix Financial Services LLC

2. The name and the Florida street address of the registered agent and office are:

Corporation Service Company

(Name)

1201 Hays Street

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Tallahassee, FL 32301

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.*

Sonya L Cordell  
(Signature)

Sonya L. Cordell  
Assistant VP

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 APR -7 AM 11:10

FILED

STATE OF INDIANA  
OFFICE OF THE SECRETARY OF STATE  
CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

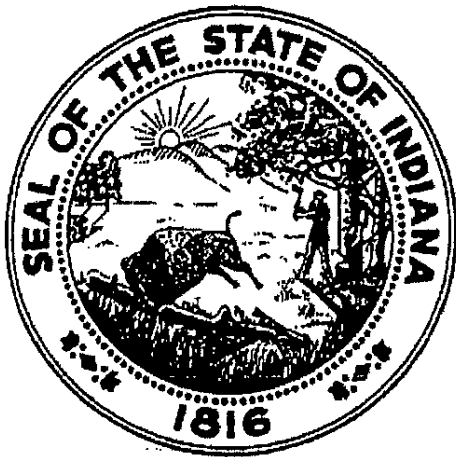
I, Connie Lawson, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

PHOENIX FINANCIAL SERVICES LLC

duly filed the requisite documents to commence business activities under the laws of State of Indiana on January 06, 2014, and was in existence or authorized to transact business in the State of Indiana on March 05, 2014.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Fifth Day of March, 2014.

*Connie Lawson*

Connie Lawson, Secretary of State

2014010700498 / 2014030599377