

M/4000006283

(Requestor's Name)

(Address)

(Address)

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☐ PICK-UP

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(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 3, 2014

ROBERT POWELL  
COLLECTION LICENSING, LLC  
1752 S. LIMA ST.  
AURORA, CO 80163

SUBJECT: NATIONAL PRINCIPAL GROUP LLC  
Ref. Number: W14000053656

We have received your document for NATIONAL PRINCIPAL GROUP LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return 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.

Tammi Cline  
Regulatory Specialist II

Letter Number: 914A00018801

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TALLAHASSEE, FLORIDA

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# COLLECTION LICENSING, LLC

**Robert Powell, CEO**

1752 S. Lima St. Phone: (303) 369-1586  
Aurora, CO 80163 Fax: (303) 369-1589  
[robert@rpowell.net](mailto:robert@rpowell.net)  
[robert@collectionlicensing.com](mailto:robert@collectionlicensing.com)

**VIA CERTIFIED MAIL # 7013 2250 0001 6054 3737**

**August 21, 2014**

**To: Florida Department of State**

**Re: National Principal Group, LLC**

The foreign business registration paperwork and check for the above referenced **business** is enclosed. **Please mail the foreign certificate of authority directly to me and I will forward to the client or scan and email a copy of the foreign certificate of authority to me and mail the original to the client.**

If there are any problems with the attached paperwork, please allow me the professional courtesy of resolving any deficiencies before returning the paperwork to me. Rather than returning the paperwork, causing further delays and expense for your department and state, if you have any further questions or concerns regarding this filing, please contact me via email or call at 303-369-1586 so that I can resolve any problems immediately.

Very truly yours,

*Robert D. Powell*

Robert Powell  
Licensing Administrator

Enclosures

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** National Principal Group LLC dba Lakefront Processing Solutions  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Robert Powell

Name of Person

Collection Licensing, LLC

Firm/Company

1752 S. Lima St.

Address

Aurora, CO 80012

City/State and Zip Code

robert@rpowell.net

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Robert Powell

Name of Contact Person

at ( 303 )

Area Code

369-1586

Daytime Telephone Number

**MAILING ADDRESS:**

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☐ \$160.00 Filing Fee, Certificate  
of Status & Certified Copy

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

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

1. National Principal Group 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. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. NY 3. 45-5617397  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 255 Great Arrow Ave Suite 201  
Buffalo, NY 14207  
(Street Address of Principal Office)

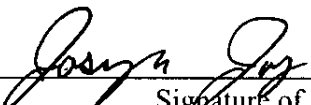
6. 255 Great Arrow Ave Suite 201  
Buffalo, NY 14207  
(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Joseph Joy, Managing Member, 255 Great Arrow Ave Suite 201 Buffalo, NY 14207

Charles Joy, Sr., Member 255 Great Arrow Ave Suite 201 Buffalo, NY 14207

8. 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)

  
\_\_\_\_\_  
Signature of an authorized person

(In accordance with section 605.0203, 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.)

Joseph Joy, Managing Member  
\_\_\_\_\_  
Typed or printed name of signee

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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 Liability Company is:

National Principal Group LLC

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

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

NRAI Services, Inc.

(Name)

1200 South Pine Island Road

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

Plantation

FL 33324

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 605, Florida Statutes.*

NRAI Services, Inc.  
By: \_\_\_\_\_

(Signature)

**Lori Soulliere-Stryson**  
**Asst. Vice President**

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

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**State of New York**  
**Department of State** } ss:

I hereby certify, that NATIONAL PRINCIPAL GROUP LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 06/06/2012, and that the Limited Liability Company is existing so far as shown by the records of the Department.



\*\*\*

*WITNESS my hand and the official seal  
of the Department of State at the City of  
Albany, this 31st day of July two  
thousand and fourteen.*

*Anthony Scardino*

*Executive Deputy Secretary of State*