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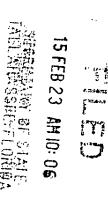
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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A STATES MAR O 5 2015



February 27, 2015

JEREMY COBURN 909 NE LOOP 410 SUITE 100 SAN ANTONIO, TX 78209

SUBJECT: 212 LOANS, LLC. Ref. Number: W15000014367

We have received your document for 212 LOANS, LLC. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

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.

Letter Number: 815A00004118

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

www.sunbiz.org

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	212 L	oans, LLC.				
	Name of Limit	ed Liability Company				
			ransact Business in Florida." Certificate of ity company to transact business in Florida			
Please return all correspondence	concerning this matter to th	e following:				
	Jerem	y P. Coburn				
	1	Name of Person				
	212	Loans, LLC.				
	I	Firm/Company				
	909 NE Lo	op 410, Suite	100			
		Address				
	San Antor	io, Texas 78	209			
	City/S	State and Zip Code				
		burn@gmail.				
		ed for future annual report notif	ication)			
For further information concerning	ig this matter, please call:					
Jeremy F	P. Coburn	at (210)	792-2270			
Name	of Contact Person		Paytime Telephone Number			
MAILING ADDRESS: Division of Corporation Registration Section	Division	ET ADDRESS: on of Corporations				
P.O. Box 6327						
Tallahassee, FL 32314		Executive Center Circle assee, FL 32301				
Enclosed is a check for the ☐ \$125.00 Filing Fee	following amount: \$\square\$ \$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 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:

OILI	JIV LIMITED LIABILITY COMPANY TO TANNSACT BOS	LLC.	
·	(Name of Foreign Limited Liability Company; must include "I	Limited Liability Company," "L.L.C.,"	or "LLC.")
name	unavailable, enter alternate name adopted for the purpose of transac Company," "L.L.C." or "LLC.")	cting business in Florida. The alternate	name must include "Limited
авину	Toyas	46-186605	9
(Jurisd	diction under the law of which foreign limited liability bany is organized)	(FEI number, if appli	
comp	February 16	, 2015	
	(Date first transacted business in Flori (See sections 605.0904 & 605.0905, F.S.	da, if prior to registration.) to determine penalty liability)	
	308 West Parkwood Ave		
	Friendswood, Te	exas 77546	vije
	(Street Address of P		- 1
	909 NE Loop 41	0, Suite 100	
	San Antonio, To	exas 78209	22 P
	(Mailing Ac	ddress)	E E
The	e name, title or capacity and address of the person(s	s) who has/have authority to n	nanage is/are:
ere	my P Coburn 909 NE Loop 410,	Ste.100 San Antoni	o, Tx 78209
cot	tt McClellan 116 W 10th Street Ho	ouston, Tx 77008	.
1arl	k Bloom 5057 Keller Springs Road	d Ste.300 Addison,	Tx 75001
ving cepta	ched is an original certificate of existence, no more custody of records in the jurisdiction under the law able. If the certificate is in a foreign language, a trait e submitted)	v of which it is organized. (A	photocopy is not
	Signature of an au ance with section 605.0203, F.S., the execution of this observed constitutes that any false information submitted in a document to the Department of Sta		
	Jeremy P. Cobu	ırn Manager	
	Typed or printed nar	 	

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.

	the Limited Liability Cor	2 Loans, LL	_C.		
If unavailable, th	e alternate to be used in	the state of Florida	is:		
2. The name and	the Florida street addre	ss of the registered	agent and office are:		_
	Sh	ane Johnso	on		
•		(Name)		N	
	5601 Mar	iner Street	Suite 104	三 三 三 三 5	
-	Florida Street	Address (P.O. Box NO	T ACCEPTABLE)	TEB TEB	· • • • • • • • • • • • • • • • • • • •
	Tampa	ri	33609	23	inge Para
-	AM 10: 0	enter ()			
liability company registered agent a statutes relating t	ted as registered agent ar at the place designated it and agree to act in this co the proper and complet tions of my position as re	n this certificate, I apacity. I further a te performance of n	hereby accept the appo gree to comply with the ny duties, and I am fami	ve stated limited intment as provisions of a iliar with and	ł
	Shans ()	ohnson			
	dsi	gnature)			
	\$ 100.0 \$ 25.0 \$ 30.0	00 Designation o	of Registered Agent		

\$ 5.00 Certificate of Status (optional)

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Coby Shorter, III
Deputy Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for 212 Loans, LLC. (file number 801721624), a Domestic Limited Liability Company (LLC), was filed in this office on January 23, 2013.

It is further certified that the entity status in Texas is in existence.

Delayed Effective date: January 24, 2013

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on February 17, 2015.



15 FEB 23 AM 10: Of Short Shor

Coby Shorter, III Deputy Secretary of State

Phone: (512) 463-5555 Prepared by: SOS-WEB Come visit us on the internet at http://www.sos.state.lx.us/ Fax: (512) 463-5709

(512) 463-5709 Dial: 7-1-1 for Relay Services TID: 10264 Document: 591722680002