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TO SERVEN

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Blue Diamond Fundir	ng LLC	-	
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			Art of Inc. File
]	LTD Partnership File
			Foreign Corp. File
			L.C. File
			Fictitious Name File
			Trade/Service Mark
			Merger File
			Art. of Amend. File
		<u> </u>	RA Resignation
			Dissolution / Withdrawal
	•		Annual Report / Reinstatement
			Cert. Copy
			Photo Copy
			Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
			Officer Search
			Fictitious Search
Signature			Fictitious Owner Search
			Vehicle Search
			Driving Record
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	Date Time		UCC 11 Search
			UCC 11 Retrieval
Walk-In	Will Pick Up		Courier

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Blue Diamond Funding, LLC 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:
J. Edwin
Name of Person
Blue Diamond Funding, LLC
Firm/Company
4613 N. University Dr623 Address
Address
Coral Springs, FL 33067 City/State and Zip Code
City/State and Zip Code
documents @ bluediamond settlements, com
documents @ bluediam and settlements. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Mark Plater # 855 779-2583
Name of Contact Person at (855) 779 - 2583 Area Code Daytime Telephone Number
MAILING ADDRESS: STREET ADDRESS:
Division of Corporations Registration Section Division of Corporations Registration Section
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\sum_\$125.00 \text{ Filing Fee} \sum_\$130.00 \text{ Filing Fee & \$\sum_\$\$155.00 \text{ Filing Fee & \$\sum_\$\$\$ \$160.00 \text{ Filing Fee, Certificate } \text{ Certified Copy} \text{ of Status & Certified Copy}

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

COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	
1. Blue Diamond Funding 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 Liability Company," "L.L.C," or "LLC.")	
2. Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)	
(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)	
s. 4613 N. University Dr - 623	- to #
Coral Springs, FL 33067 - (Street Address of Principal Office) 6. 4613 N. University Dr 623	
(Street Address of Principal Office)	The same
6. 4613 N. University Dr 623	· All or in the second
Coral Springs, FL 33067	AMID: 12
(Mailing Address)	
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	RIDA RIDA
Name: Your Capital Connection, Inc.	•
Office Address: 417 E. Virginia St. Ste. 1	
Tallahassee , Florida 32301 (City) (Zip code)	
(City) (Zip code)	
Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation of this application, I hereby accept the appointment as registered agent and agree to act in this capacity. If with the provisions of all statutes relative to the proper and complete performance of my duties, and I am the obligations of my position as registered agent.	urther agree to comply
Alga/	
(Registered agent's signature) Seth Neeley to	your Capital
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:	· Connection In
J. Edwin, 4613 N. University Dr - 623 Cord Spi	rings FL 33067
Title: COO	
•	
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having city jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the translator must be submitted) Signature of an authorized person	
Signature of an authorized person	
(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the facts stated herein are true. I am aware that any false information submitted in a document to the Department degree felony as provided for in s.817.155, F.S.)	ne penalties of perjury that ent of State constitutes a third

Typed or printed name of signee

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BLUE DIAMOND FUNDING 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 EIGHTH DAY OF MAY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BLUE DIAMOND FUNDING LLC" WAS FORMED ON THE SIXTEENTH DAY OF OCTOBER, A.D. 2014.

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

5622766 8300

AUTHENTICATION: 2361272 DATE: 05-08-15

Jeffrey W. Bullock, Secretary of State

150639842

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