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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	



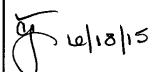


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COVER LETTER

10.	Division of Corpor				•	
SUBJE	StuFund Financ	ce, LLC				
. SODJE	ci	Name o	of Limited Liability	Company		
		y Foreign Limited Liability Committed to register the above ref				
Please r	eturn all corresponde	nce concerning this matter to the	he following:			
	Erin Keavı	ney				
			Name of Person			
	StuFund F	inance, LLC			Page 1	<u>ਜ</u> .
	-		Firm/Company			夏丽
	110 Allen	Road, Suite 302			1 57 0 124 200	ILED 112 PP
		·	Address		All for	M 3.5
	Basking R	idge, NJ 07920			第2 年 第2 年	55
		City	/State and Zip Code	•		
	erin.keavney	@sfgroupltd.com				
		E-mail address: (to be us	sed for future annua	l report no	tification)	
For furtl	ner information conce	erning this matter, please call:				
	Erin Keavney		908 at (660-41	52	
	Na	me of Contact Person	Area Code	Day	ytime Telephone Number	
	MAILING ADDRI Division of Corpora Registration Section P.O. Box 6327 Tallahassee, FL 323	tions		Division Registrat Clifton E 2661 Exc	of Corporations tion Section Building ecutive Center Circle see, FL 32301	
Enclose	d is a check for the fo ■ \$125.00 Filing Fo		□ \$155.00 Fili Certified Copy		□ \$160.00 Filing Fee, Co	

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:

(Name of Fore	ign Limited Liability Company; m	ust include "Limited Liabi	ity Company," "L.L.C.," or "l	LLC.")	
If name unavailable, enter al Liability Company," "L.L.C,"	ternate name adopted for the purpo " or "LLC.")	se of transacting business	in Florida. The alternate name	must include "Li	mited
Delaware		3. 61-1559609			
(Jurisdiction under the law company is organized)	of which foreign limited liability	,	(FEI number, if applicable)		_
. Upon Kegi.	(Date first transacted busin (See sections 605.0904 & 605	ess in Florida, if prior to re 5.0905, F.S. to determine t	egistration.)		
1201 Orange Street, #6	600		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(₄₄ .	
City of Wilmington, No	ew Castle County, Delaware 19	899		्रिक्त ज	
	(Street Address of		·		1 111
5. 110 Allen Road, Suite 3				意識に	
Basking Ridge, NJ 079				lad at. ≥	
		Address)		100	Annual Property
'. Name and street addres	s of Florida registered agent: (F	P.O. Box NOT acceptab	ole)	3 57 2 57 2 57	
Name:	InCorp Services, Inc.			Gar.	
Office Address:	17888 67th Court North				
	Loxahatchee		Florida 33470 (Zip code)		
Registered agent's accept	(City)		(Zip code)		
his application, I hereby with the provisions of all she obligations of my positions. B. The name, title or capa	_ / 7	stered agent and agree and complete performant be stered agent's signature)) who has/have authority	to act in this capacity. I fu ce of my duties, and I am f ha H o F IN Corp y to manage is/are:	rther agree to d familiar with ar	comply id accep
Attached is a certificate	of existence, no more than 90 d	avs old, duly authentica	ted by the official having c	ustady of record	s in the
	of which it is organized. (If the obline is abmitted)				
	/ []				
	n 605.0203, F.S., the execution true. I am aware that any false in				

Typed or printed name of signee

degree felony as provided for in s.817.155, F.S.)

Sergio Sotolongo

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "STUFUND FINANCE, 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 TWENTY-EIGHTH DAY OF MAY, A.D. 2015.

15 JUN 12 PM 3-57

4099706 8300

150794657

Jeffrey W. Bullock, Secretary of State

AUTHENTICATION: 2414406

DATE: 05-28-15

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