M15000004804

(Requestor's Name)			
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
W15-12263			
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Office Use Only.

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SECRETARY OF STATE

T. HAMPTON

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: Liberty Settlement Solutions 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:

For further information concerning this matter, please call:

Marc Hermes at 954 763-1165

Name of Contact Person Area Code 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 Certificate of Status
□ \$130.00 Filing Fee Certificate Opy
□ \$155.00 Filing Fee □ \$160.00 Filing Fee, Certificate Opy
□ \$160.00 Filing Fee, Certificate Opy



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 19, 2015

MARC HERMES 16 NE 4TH STREET STE 210 FORT LAUDERDALE, FL 33301

SUBJECT: LIBERTY SETTLEMENT SOLUTIONS LLC

Ref. Number: W15000012263

We have received your document for LIBERTY SETTLEMENT SOLUTIONS 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):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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.

Shelia H Young Regulatory Specialist II

Letter Number: 415A00003537



This correspondence shall serve to confirm the fact that the two Liberty Settlement Solutions entities that are registering to do business in the State of Florida are owned and operated ostensibly by the same ownership group. As such, Liberty Settlement Solutions, LLC (Document No. L11000093805) hereby consents to the use of a similar name by Liberty Settlement Solutions, LLC (Document No. W15000012263.

If you have any questions or require any additional information, please do not hesitate to contact me.

Sincerely

Marc Hermes President

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:

1. Liberty Settleme		
(Name of Foreign	m Limited Liability Company; must include "Limited Liability Compan	y," "L.L.C.," or "LLC.")
(If name unavailable, enter alter Liability Company," "L.L.C," o	ernate name adopted for the purpose of transacting business in Florida. or "LLC.")	The alternate name must include "Limited
_{2.} DE	_{3.} 47-2249839	
(Jurisdiction under the law of company is organized)	of which foreign limited liability (FEI nu	mber, if applicable)
4. December 20)14	
	(Date first transacted business in Florida, if prior to registration. (See sections 605.0904 & 605.0905, F.S. to determine penalty liabi	ASEC T
5. 16 NE 4th Str	reet, Suite 210	AFE B
Fort Lauderda	ale, FL 33301	SSE
6. 16 NE 4th Stre	(Street Address of Principal Office) eet, Suite 210	GF STA
Fort Lauderda	ale, FL 33301	ID A
	(Mailing Address)	
7. The name, title or ca	apacity and address of the person(s) who has/have auti	hority to manage is/are:
Jim McCabe, Cl	hief Executive Officer	
Marc Hermes, F	President	
,		
naving custody of record acceptable. If the certific must be submitted) ———————————————————————————————————	al certificate of existence, no more than 90 days old, do do in the jurisdiction under the law of which it is organizate is in a foreign language, a translation of the certificate is in a foreign language, a translation of the certificate is in a foreign language, a translation of the certificate is in a foreign language. Signature of an authorized person 3, F.S., the execution of this document constitutes an affirmation under the penalsulation in a document to the Department of State constitutes a third degree for the degree of the constitutes at third degree for the degree of the constitutes at third degree for the constitutes at third degree for the certificate of t	nized. (A photocopy is not icate under oath of the translator
·	Marc Hermes	and the same of th
	Typed or printed name of signee	

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.

If unavailable	e, the alternate to be used in the	state of Florida is:	
2. The name	and the Florida street address of	of the registered agent and office are:	
	Marc Hermes		
		(Name)	
	16 NE 4th Stree	t, Suite 210	
	Florida Street Addi	ress (P.O. Box NOT ACCEPTABLE)	_
	Fort Lauderdale	FL 33301	
		City/State/Zip	_
		City/State/Zip o accept service of process for the above sits certificate, I hereby accept the appoint	

(Signature)

Statutes.

accept the obligations of my position as yestered agent as provided for in Chapter 605, Florida

\$ 100.00 Filing Fee for Application\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

PAGE

The First State

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

DELAWARE, DO HEREBY CERTIFY "LIBERTY SETTLEMENT SOLUTIONS, 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-FOURTH DAY OF APRIL, A.D.

2015.

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

5633239 8300

150563371

AUTHENT CATION: 2321170

DATE: 04-24-15

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