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(Requestor's Name)
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W5-39240

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COVER LETTER

TO:	egistration Section vivision of Corporations							
SUBJE	Freight Factoring Specialists, LLC							
Name of Limited Liability Company								
The enc Existence	sed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of and check are submitted to register the above referenced foreign limited liability company to transact business in Florida	f 						
Please r	arn all correspondence concerning this matter to the following:							
	Steven Newman							
	Name of Person	•						
	Freight Factoring Specialists, LLC							
Firm/Company								
120 East Oakland Park Blvd; Suite 105								
Address								
	Fort Lauderdale, Florida 33334							
City/State and Zip Code								
	snewman@truckingcapital.com							
	E-mail address: (to be used for future annual report notification)							
For furt	information concerning this matter, please call:							
	teven Newman 954 536-4525 at ()							
	Name of Contact Person Area Code Daytime Telephone Number							
	IAILING ADDRESS: ivision of Corporations egistration Section O. Box 6327 allahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301							
Enclose	s a check for the following amount: \$\\$\\$125.00 \text{ Filing Fee} \text{ \$\sigma\$}\$							



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 4, 2015

STEVEN NEWMAN 120 EAST OAKLAND PARK BLVD, SUITE 105 FORT LAUDERDALE, FL 33334

SUBJECT: FREIGHT FACTORINGS SPECIALITS, LLC

Ref. Number: W15000039240

We have received your document for FREIGHT FACTORINGS SPECIALITS, LLC and your check(s) totaling \$125.00. 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.

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) 245-6052.

Letter Number: 815A00011780

Valerie Herring Regulatory Specialist II New Filing Section

www.sunbiz.org

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:

	eign Limited Liability Company; mus	t include "Limited Liability	Company," "L.L.C.," or	r "LLC.")		-
(If name unavailable, enter a Liability Company," "L.L.C,	Iternate name adopted for the purpose	of transacting business in F	lorida. The alternate name	me must inc	lude "Lir	nit e d
Delaware	,,	2 47-4099690				
(Jurisdiction under the law company is organized)	of which foreign limited liability	(F.	El number, if applicable	:)		-
4						
	(Date first transacted busines (See sections 605.0904 & 605.	ss in Florida, if prior to regis 0905, F.S. to determine pena	tration.) alty liability)			
5. 120 East Oakland Parl	k Boulevard; Suite 105			_		
Fort Lauderdale, FL 33	3334					
100 0 0 10 10	(Street Address of P	rincipal Office)				
6. 120 East Oakland Park	Boulevard; Suite 105			- 3		
Fort Lauderdale, FL 33				ÉB	5	
	(Mailing A	(ddress)	, , , , , , , , , , , , , , , , , , , ,		NIOF	2
7. Name and street addres	ss of Florida registered agent: (P.	O. Box NOT acceptable)			19	
Name:	Randal Sweet			ᇩ	III.	
Office Address:	120 E Oakland Park Blvd #105			35	$\ddot{\omega}$	Z.
	Ft Lauderdale	. Fl	orida ³³³³⁴	Sm	34	
Registered agent's accep	(City)	,,,,	(Zip code)	_		
his application, I hereby	gistered agent and to accept serv accept the appointment as registe statutes relative to the proper and tion as registered agent	ered agent and agree to a	ct in this capacity. I	further ag	ree to co	mply
the obligations of my posi	Ma	ered agent's signature) who has/have authority to	manage is/are:	_		
the obligations of my posi	(Registe		manage is/are:	_		
the obligations of my positions. 8. The name, title or capa	(Register acity and address of the person(s) mager		manage is/are:			
the obligations of my positions. 8. The name, title or capa Randal Sweet, Office Man	(Register acity and address of the person(s) mager		manage is/are:			
8. The name, title or capa Randal Sweet, Office Mar 120 East Oakland Park Bl Ft Lauderdale, FL 33334	(Register calcity and address of the person(s) mager (vd. #105) of existence, no more than 90 day of which it is organized. (If the ce	who has/have authority to	by the official having	custody of	records	in the ler oath

Typed or printed name of signee

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

Randal Sweet



SECRETARY OF STATE TALLAHASSEE FLORIDA

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FREIGHT FACTORING SPECIALISTS 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 SIXTEENTH DAY OF JUNE, A.D. 2015.

8300 5741829

150925045

Jeffrey W. Bullock, Secretary of State AUTHENTACATION: 2470867

DATE: 06-16-15

ay verify this certificate online rp.delaware.gov/authver.shtml