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W15-41856

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06/12/15--01013---006 **125.00



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COVER LETTER

TO: Registration Section

Division of Corporations
SUBJECT: The Senicing Company 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:
BOLBARA DOLAN
Name of Person
Firm/Company
5781 W. Sunrise Blud. Address
Address
Plantatin F2 33313 City/State and Zip Code
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Archew Leavy at 954, 37-7-9033 Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclosed is a check for the following amount: \$\overline{\mathbb{U}}\$125.00 Filing Fee \$\overline{\mathbb{U}}\$130.00 Filing Fee & \$\overline{\mathbb{U}}\$155.00 Filing Fee & \$\overline{\mathbb{U}}\$160.00 Filing Fee, Certificate Copy of Status & Certified Copy



July 2, 2015

BARBARA DOLAN 5781 W. SUNRISE BLVD PLANTATION, FL 33313

SUBJECT: THE SERVICING COMPANY

Ref. Number: W15000041856

We have received your document for THE SERVICING COMPANY and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

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.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 215A00012656

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. THE SERVICING COM		de "Limited Liability Company," "L.L.C.," or	"I C ")		-
(Name of Fore	ngn Limited Liability Company; must includ	de Limited Liability Company, L.L.C., or	LLC.)		
Liability Company," "L.L.C,"		nsacting business in Florida. The alternate nam	ne must inclu	ıde "Lin	- nited
2. DELAWARE	J.	90-0738831			_
company is organized)	of which foreign limited liability	(FEI number, if applicable)			
4. 5/28/15	(Date first transacted business in Flo	orida, if prior to registration.)	-		
5. 5781 W. Sunrise Blvd	(Date first transacted business in Flo (See sections 605.0904 & 605.0905, F	S. to determine penalty liability)	_		
Plantation, FL 33313					
	(Street Address of Principa	l Office)	- 		
6. 5781 W. Sunrise Blvd			- E8	ل ت	770
Plantation, FL 33313			AH A	311 JUL 15	₹ 71. ₹
-	(Mailing Address)	- 33 P		
7. Name and street addres	s of Florida registered agent: (P.O. Box	(NOT acceptable)	n Pa	=	
Name:	Barbara Dolan		CALC TACK	ֆ։ է	i
Office Address:	5781 W. Sunrise Blvd		Au.	Φ	
	Plantation,	, Florida 33313			
.	(City)	(Zip code)	-		
this application, I hereby	gistered agent and to accept service of paccept the appointment as registered agentatutes relative to the proper, and compition as registered agent.	process for the above stated corporation gent and agree to act in this capacity. I f Blete performance of my duties, and I am	urther agr	ee to co	mply
	(Registered age	ent's signature)			
8. The name, title or capa Barbara Dolan, Manager	ucity and address of the person(s) who ha	as/have authority to manage is/are:			
5781 W. Sunrise Blvd	(1-10) - (1-10)				
Plantation, FL 33313	· · · · · · · · · · · · · · · · · · ·		····		
9. Attached is a certificate jurisdiction under the law of the translator must be su	of which it is organized. (If the certificat	duly authenticated by the official having of the is in a foreign language, a translation of the translation	custody of the certific	records cate unc	in the ler oath

(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Barbara Dolan, Manager

Delaware

APPHOVEL AND FILED

15 JUL 15 AM 9: 49

SECRETARY OF STATE TALLAHASSEE FLORIDA

The First State

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

DELAWARE, DO HEREBY CERTIFY "THE SERVICING COMPANY 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-THIRD DAY OF JUNE, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "THE SERVICING COMPANY LLC" WAS FORMED ON THE NINTH DAY OF JUNE, A.D. 2011.

4994900 8300

150958863

AUTHENTACATION: 2492275

DATE: 06-23-15

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