# MEDICIPATION

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(Cit	y/State/Zip/Phone	e #)		
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# 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:

Century Student Loan Support, 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 alt Liability Company," "L.L.C," or "LLC.")	ernate name must include "Limited
2. California 3. 46-3568864	
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number,	if applicable)
4. Upon Filing	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5 1061 Main Street, Suite 28	,
J	
North Huntingdon, PA 15642	
(Street Address of Principal Office)	A second
6. 1061 Main Street, Suite 28	
North Huntingdon, PA 15642 (Mailing Address)	रेश्चा छ
Glenn Corey, Manager	
8. Attached is an original certificate of existence, no more than 90 days old, duly a having custody of records in the jurisdiction under the law of which it is organized acceptable. If the certificate is in a foreign language, a translation of the certificate must be submitted)	d. (A photocopy is not
Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of am aware that any false information submitted in a document to the Department of State constitutes a third degree felony and the Corey	of perjury that the facts stated herein are true as provided for in s 817.155, F.S.)
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.

1. The name of the Limited Liability Company is:

Century Student	Loan Support, LLC		
If unavailable,	the alternate to be used in the	e state of Florida is:	
2. The name a	nd the Florida street address	of the registered agent and office are:	·
	C T Corporation System	•	
		(Name)	
	1200 South Pine Island Road		
	Florida Street Add	dress (P.O. Box NOT ACCEPTABLE)	TION TO
	Plantation	FL 33324	
		City/State/Zip	
liability comparegistered agent statutes relating accept the obligistatutes.	ny at the place designated in t it and agree to act in this capa g to the proper and complete p	to accept service of process for the above this certificate, I hereby accept the apporacity. I further agree to comply with the performance of my duties, and I am family stered agent as provided for in Chapter (Michelanter)  Michelanter	intment as provisions of al iliar with and
	\$ 100.00 \$ 25.00	Filing Fee for Application  Designation of Registered Agent	
	\$ 30.00	Certified Copy (optional)	
	\$ 5.00	Certificate of Status (optional)	

### State of California

## Secretary of State

#### **CERTIFICATE OF STATUS**

ENTITY NAME: CENTURY STUDENT LOAN SUPPORT, LLC

FILE NUMBER:

201324810165

FORMATION DATE:

08/29/2013

TYPE:

DOMESTIC LIMITED LIABILITY COMPANY

JURISDICTION:

**CALIFORNIA** 

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of July 27, 2015.

ALEX PADILLA Secretary of State