

M16000004715

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

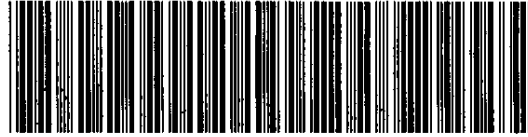
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

JUN 14 2016
J. HARRIS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SREOF LOAN HOLDINGS, 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:

Daisy Castro

Name of Person

Schulten Ward Turner & Weiss, LLP

Firm/Company

260 Peachtree Street, Suite 2700

Address

Atlanta, GA 30303

City/State and Zip Code

d.castro@swtlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daisy Castro

404

688-6800

Name of Contact Person

at (_____) _____

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

☒ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

SCHULTEN WARD TURNER & WEISS



ATTORNEYS AT LAW

A LIMITED LIABILITY PARTNERSHIP

WM. SCOTT SCHULTEN
KEVIN L. WARD
DAVID L. TURNER
ERIC L. WEISS
JON R. ERICKSON
WILLIAM M. JOSEPH
MARTHA A. MILLER
J. ZACHARY ZIMMERMAN
ANDREA L. PAWLAK
ROBERT D. MERCER
DEAN R. FUCHS

MARIA F. STEDRY
BRANDON C. HARDY
ERIC J. SILVA
STEPHEN W. BROWN
TYER K. KEENAN
MAHEEN AKHTER
AIMEE D. LA TOURETTE

STEVEN H. SADOW, SPECIAL COUNSEL

June 1, 2016

Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: SREOF Loan Holdings, LLC
Our File No.: 4533.012

Dear Madam or Sir:

Enclosed please find the Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida. Also enclosed are the Certificate of Existence and a check in the amount of \$130 for the registration fee.

Thank you for your assistance.

Very truly yours,

A handwritten signature in dark ink, appearing to read "Daisy Castro", written over the typed name.

Daisy Castro

Assistant to Eric L. Weiss, Esq.

/dc

Enc.

**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. SREOF LOAN HOLDINGS, 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 alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____

(FEI number, if applicable)

4. Registration date June 3, 2016

(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 5820 Clarion Street, Suite 200

Cumming, GA 30040

(Street Address of Principal Office)

6. _____

(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida

(City)

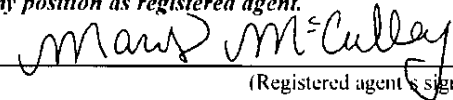
32301

(Zip code)

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TALLAHASSEE, FLORIDA

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



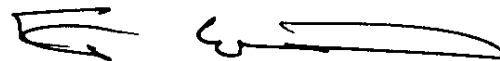
Maris McCulley

(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

James Freeman, Manager, 5820 Clarion Street, Suite 200, Cumming, GA 30040

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)



Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Eric L Weiss, Attorney-at-law.

Typed or printed name of signee

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "SREOF LOAN HOLDINGS, 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 THIRTY-FIRST DAY OF MAY, A.D. 2016.



6046027 8300

SR# 20164100450

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

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 202408818

Date: 05-31-16