## MI600000852

(Requestor's Name)					
(Address)					
(Address)					
(Cit	y/State/Zip/Phone	e #)			
PICK-UP	WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					
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## COVER LETTER

TO:	Registration Section Division of Corporati	ons						
SUBJE	NEVADA FACT	ORING LLC						
Name of Limited Liability Company								
The end Existen	losed "Application by F ee, and check are submi	oreign Limited Liability Com tted to register the above refer	pany for Authoriza enced foreign limit	tion to Tra ted liability	ansact Business in Florida," Ce y company to transact business	rtificate of in Florida		
Please i	eturn all correspondence	e concerning this matter to the	following:					
	WILLIAM T	. COLEMAN						
	Name of Person							
	BRINKLEY MORGAN							
	Firm/Company							
	200 EAST LAS OLAS BLVD., 19TH FLOOR							
			Address	<del>,</del>				
	FORT LAUDERDALE, FL 33301  City/State and Zip Code							
	william.colema	n@brinkleymorgan.com						
	· · · · · · · · · · · · · · · · · · ·	E-mail address: (to be use	d for future annual	report not	fication)			
For furtl	er information concerni	ng this matter, please call:						
	WILLIAM T. COLEM	IAN	954 at (	522-220	00			
	Name	of Contact Person	Area Code	Day	time Telephone Number			
	MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division of Registratic Clifton Board 2661 Exe	cutive Center Circle ec, FL 32301			
Enclose	is a check for the follo \$125.00 Filing Fee	wing amount:  \$\Boxed{\Omega} \\$130.00 \text{ Filing Fee & Certificate of Status}	□ \$155.00 Filing Certified Copy	g Fee &	\$160.00 Filing Fee, Certif of Status & Certified Copy	icate		

## 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:

(Name of Fore	eign Limited Liability Company; must include	e "Limited Liability Company," "L.L.C.," or	"LLC.")
If name unavailable, enter al Liability Company," "L.L.C,	ternate name adopted for the purpose of trans	sacting business in Florida. The alternate name	ne must include "Limited
, Nevada		46-5554804	
	of which foreign limited liability	(FEI number, if applicable)	
. <u>N/A</u>			
•	(Date first transacted business in Flo (See sections 605.0904 & 605.0905, F.	rida, if prior to registration.) S. to determine penalty liability)	<del>-</del>
. NEVADA FACTORII			<del>-</del>
200 EAST LAS OLAS	BLVD., SUITE 1600, FORT LAUERD		
	(Street Address of Principal	Office)	
SAME			
SAME			- 18 de la company de la compa
	(Mailing Address)		
Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acceptable)	
Name:	DOUGLAS KUTZGAR	<u></u>	<b>55</b>
Office Address:	200 EAST LAS OLAS BLVD., SUITE	1600	
	FORT LAUDERDALE	, Florida 33301	
	(City)	(Zip code)	-
lesignated in this applica o complywith the provisi	gistered agent and to accept service of p tion, I hereby accept the appointment as ons of all statutes relative to the proper of my position as registered agent.  (Registered agen	s registered agent and agree to act in thi and complete performance of my duties	is capacity. I further agre
8. The name, title or can	acity and address of the person(s) who ha	s/have authority to manage is/are:	
DOUGLAS KUTZGAR,		<b>3</b>	
NEVADA FACTORING		<del></del>	
200 EAST LAS OLAS B	LVD., SUITE 1600, FORT LAUDERDA	ALE, FL 33301	
O. Attached is a certificate urisdiction under the law of the translator must be so	of existence, no more than 90 days old, of which it is organized. (If the certificate ubmitted)	e is in a foreign language, a translation of	custody of records in the f the certificate under oath
	d in accordance with section 605.0203 (1) to the Department of State constitutes a thi		
	DOUGLAS KUTZGAR		

Typed or printed name of signee

SECRETARY OF STATE



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## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, NEVADA FACTORING LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since January 22, 2014, and is in good standing in this state.

OF THE STATE OF TH

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on October 19, 2016.

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20161019-1744
You may verify this electronic certificate
online at http://www.nvsos.gov/