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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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BF 11/17/17



November 6, 2017

CARDINAL SERVICING COMPANY, LLC 1000 RIVERSIDE AVE STE 400 JACKSONVILLE, FL 32204 US

SUBJECT: CARDINAL SERVICING COMPANY, LLC

Ref. Number: W17000088892

We have received your document for CARDINAL SERVICING COMPANY, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

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) 245-6051.

Letter Number: 317A00022445

BRITTANY M FIGUEROA Regulatory Specialist II Registration/Qualification Section

SASS. ALEK W

73 4

COVER LETTER

	egistration Section ivision of Corpora	tions					
SUBJECT	. Cardinal Servici	ng Company, LLC					
		Name of	Limited Liability (Company			
		Foreign Limited Liability Com itted to register the above refer					
Please retu	rn all correspondenc	ce concerning this matter to the	following:				
		N	lame of Person				
	Cardinal S	ervicing Company, LLC					
		Firm/Company					
	1000 Rive	rside Ave Ste 400					
			Address				
	Jacksonville	e, FL 32204					
		City/S	State and Zip Code				
	rachel.beck@	figadvisors.com					
		E-mail address: (to be use	d for future annual	report no	lification)		
For further	information concer	ning this matter, please call:					
R	lachel Beck		at (904	224-1	204		
_	Nam	e of Contact Person	Area Code	Day	rtime Telephone Number		
Di Re P.	AlLING ADDRES ivision of Corporation egistration Section O. Box 6327 allahassee, FL 3231	ons		Division Registrat Clifton B 2661 Exc	of Corporations ion Section duilding ecutive Center Circle see, FL 32301		
	s a check for the foll \$125.00 Filing Fee	•	□ \$155.00 Filin Certified Copy	ig Fec &	☐ \$160.00 Filing Fee, Cer of Status & Certified Copy		

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPILANCE 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:

	Iternate name adopted for the purpose	of transacting business in Florida. The alternate	name must include "Limited
.iability Company," L.L.C,		of transacting business in Florida. The anemate	name must menude 1.nmed
DE		3. 82-2809039	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applica	ble)
l	(Date first transacted busines	ss in Florida, if prior to registration.)	
	(See sections 605.0904 & 605.0	0905, F.S. to determine penalty liability)	
1000 Riverside Ave STE	400		
Jacksonville FL 3220	(Street Address of P	Principal (Milice)	
)			
	(Mailing A	Address)	
. Name and street address	ss of Florida registered agent; (P.	O. Box NOT acceptable)	
Name:	Northwest Registered Agent, I	LLC.	
Office Address:	3030 N. Rocky Point Dr. STE	<u> 150A</u>	
	Tampa	. Florida 33607	
	(City)		
Registered agent's accep	tance:	(Zip code)	
laving been named as re lesignated in this applica o complywith the provisi accept the obligations of	tance: gistered agent and to accept serv tion, I hereby accept the appoint ons of all statutes relative to the p my position as registered (Registe	ice of process for the above stated limited liment as registered agent and agree to act in proper and complete performance of my due to a complete performance of my due to agent's signature)	iability company at the place this capacity. I further agre
laving been named as re lesignated in this applica o complywith the provisi occept the obligations of a	tance: gistered agent and to accept serv tion, I hereby accept the appoints ons of all statutes relative to the p my position as registered (Registered)	ice of process for the above stated limited limited limited as registered agent and agree to act in proper and complete performance of my dured agent's signature) who has/have authority to manage is/are:	iability company at the place this capacity. I further agre
laving been named as re lesignated in this applica o complywith the provisi accept the obligations of a	tance: gistered agent and to accept serv tion, I hereby accept the appoint ons of all statutes relative to the p my position as registered (Registe	ice of process for the above stated limited limited limited as registered agent and agree to act in proper and complete performance of my dured agent's signature) who has/have authority to manage is/are:	iability company at the place this capacity. I further agree ties, and I am familiar with a
Having been named as re lesignated in this applica o complywith the provisi accept the obligations of a	tance: gistered agent and to accept serv tion, I hereby accept the appoints ons of all statutes relative to the p my position as registered (Registered)	ice of process for the above stated limited limited limited as registered agent and agree to act in proper and complete performance of my dured agent's signature) who has/have authority to manage is/are:	iability company at the place this capacity. I further agreeties, and I am familiar with a
laving been named as relesignated in this applicate or complywith the provising coept the obligations of the same	tance: gistered agent and to accept servition, I hereby accept the appoints ons of all statutes relative to the p my position as registered (Registered) acity and address of the person(s) er - 1000 Riverside Ave Ste 4	ice of process for the above stated limited limited limited as registered agent and agree to act in proper and complete performance of my dured agent's signature) who has/have authority to manage is/are:	iability company at the place this capacity. I further agree ties, and I am familiar with the place of the pl

Typed or printed name of signee

Rachel Beck

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "CARDINAL 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 THIRTEENTH DAY OF NOVEMBER, A.D. 2017.

Authentication: 203562380

Date: 11-13-17