

MB000007060

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300308297713

02/14/16--01027--008 **150.00

FILED
2018 FEB 26 A 10:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3/1/16



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 15, 2018

NICOLE SOUADDA
2098 W CHESTER PIKE SUITE 102
BROOMALL, PA 19008

SUBJECT: BROAD STREET CREDIT SOLUTIONS LLC
Ref. Number: W18000015262

We have received your document for BROAD STREET CREDIT SOLUTIONS 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):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

Please return 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.

Dionne M Pijaux
Regulatory Specialist

Letter Number: 518A00003270

FILED
2018 FEB 26 A 10:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Broad Street Credit Solutions 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:

Nicole Souadda

Name of Person

Broad Street Credit Solutions LLC

Firm/Company

2098 West Chester Pike, Suite 102

Address

Broomall PA 19008

City/State and Zip Code

nsouadda@employeecash.net

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

For further information concerning this matter, please call:

Nicole Souadda

at 484 498-8271

Name of Contact Person

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:

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input checked="" type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy | <input type="checkbox"/> \$160.00 Filing Fee, Certificate
of Status & Certified Copy |
|--|--|--|---|

2018 FEB 26 AM 10:47
STATE OF FLORIDA
TALLAHASSEE, FL

FILED

**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. Broad Street Credit Solutions 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. PA 3. 81-0932462
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. N/A
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 2098 West Chester Pike, Suite 102 6. 2098 West Chester Pike, Suite 102
(Street Address of Principal Office) (Mailing Address)
Broomall PA 19008 Broomall PA 19008

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

Name: NRAI Services Inc.

Office Address: 1200 S. Pine Island Rd.
Plantation, Florida 33324
(City) (Zip code)

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.

Jill Zygmunt Jill Zygmunt Assistant Secretary
(Registered agent's signature)

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

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>President/ CEO/ Mgr</u>	<u>Chris Hogg</u> <u>321 Baintree Rd.</u> <u>Bryn Mawr PA 19010</u>	<u>COO/Secretary/ Mgr</u>	<u>Nicole Souadda</u> <u>105 Fairfax Ct.</u> <u>Wayne PA 19087</u>
<u>Treasurer/Mgr</u>	<u>Rennie Rodriquez</u> <u>117 Ceton Ct.</u> <u>Broomall PA 19008</u>		

(Use attachments if necessary)

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)

10. 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.

Nicole M. Souadda
Signature of an authorized person

NICOLE M. SOUADDA

Typed or printed name of signer

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE

02/09/2018

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

Broad Street Credit Solutions LLC

is duly registered as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set
my hand and caused the Seal of the Secretary of the
Office to be affixed, the day and year above written

Robert Lanes

Acting Secretary of the Commonwealth

2018 FEB 26 A 10:47
SECRETARY OF
TALLAHASSEE, FLORIDA

FILED

Certification Number: TSC180209121049-1

Verify this certificate online at <http://www.corporations.pa.gov/orders/verify>