

M18000004196

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

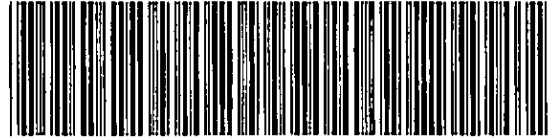
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W18-39991 RA Sign + CHO

Office Use Only



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FILED

18 MAY - 1 AM 11:37

SECRETARY OF STATE  
TALLAHASSEE, FL 32302

K SALY

MAY - 2 2018

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Crossroads Financing, 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:

JACQUELINE DE LA FUENTE

\_\_\_\_\_  
Name of Person

CROSSROADS FINANCIAL, LLC

\_\_\_\_\_  
Firm/Company

6001 BROKEN SOUND PKWY, SUITE 620

\_\_\_\_\_  
Address

BOCA RATON, FL 33487

\_\_\_\_\_  
City/State and Zip Code

jfuente@crossroadsfinancial.com

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

For further information concerning this matter, please call:

Jacqueline De La Fuente

\_\_\_\_\_  
Name of Contact Person

561

at (\_\_\_\_\_) \_\_\_\_\_  
Area Code

995-2575

\_\_\_\_\_  
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

**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. CROSSROADS FINANCING, 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. CONNECTICUT

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

3. 82-5309307

(FEI number, if applicable)

4. \_\_\_\_\_

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

5. 50 WESTON STREET

(Street Address of Principal Office)

HARTFORD, CT 06120

6. 6001 Broken Sound Pkwy, Suite 620

(Mailing Address)

Boca Raton, FL 33487

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

Name: CROSSROADS FINANCIAL, LLC

Office Address: 6001 BROKEN SOUND PKWY, SUITE 620

BOCA RATON

(City)

, Florida 33487

(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.*

  
(Registered agent's signature)

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

Title or Capacity:

Name and Address:

Title or Capacity:

Name and Address:

SOLE MBR

LEE HASKIN

CFO

JACQUELINE DE LA FUEN

3184 NW 61ST STREET

BOCA RATON, FL 33496

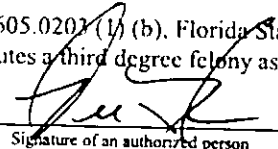
6001 BROKEN SOUND PKWY

BOCA RATON, FL 33487

(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 605.0207 (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.

  
Signature of an authorized person

LEE HASKIN  
Typed or printed name of signer

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof,  
DO HEREBY CERTIFY, that articles of organization for

CROSSROADS FINANCING, LLC

a domestic limited liability company, were filed in this office on April 24, 2018.

Articles of dissolution have not been filed, and so far as indicated by the records of this office such  
limited liability company is in existence.



Secretary of the State

FILED  
18 MAY - 1 AM 11:37  
SECRETARY OF STATE  
HARTFORD, CT 06103

Date Issued: April 25, 2018



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 27, 2018

JACQUELINE DE LA FUENTE  
CROSSROADS FINANCIAL, LLC  
6001 BROKEN SOUND PKWY, STE. 620  
BOCA RATON, FL 33487

SUBJECT: CROSSROADS FINANCING, LLC  
Ref. Number: W18000039991

We have received your document for CROSSROADS FINANCING, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Karen A Saly  
Regulatory Specialist II

Letter Number: 218A00008775