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TOTAL CONTRACTIONS

FILED
8 AUG 17 AM IO: 12

O SIMMIONS AUG 20 2018 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 343146 8204957

AUTHORIZATION :

COST LIMIT : \$ 0/25.00

ORDER DATE: August 13, 2018

ORDER TIME : 9:25 AM

ORDER NO. : 343146-080

CUSTOMER NO: 8204957

FOREIGN FILINGS

NAME: CROSSROADS FINANCE, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

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:

(Juste first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) (Street Address of Principal Office) (Street Address of Principal Office) (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Corporation Service Company Office Address: City) 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	Crossroads Finance, L	LC			
Liability Company: "L.L.C." or "L.L.C." Manager, 9385 Haven Ave Rancho Cucamonga. CA 91730 (National Company) (Registered agent's acceptance: (City) (Ci	(Name of For	reign Limited Liability Company; must in	iclude "Limited Liab	ility Company," "L.L.C	C," or "LLC.")
Liability Company. "L.I.C." or	(If name unqueitable enter a	Atomata nama adamtad faraha mumaan af	famous aring homisses	in Planta The deans	es money among include 91 facility d
Company is organized Upon filing (Date first transacted basiness in Florida, if prior to registration.) (New Sections 605, 6994 & 605, 6095, F.S., to determine penalty liability)			transacting business	in Florida. The alterna	te name must metude 1,mmed
(Jurisdiction under law of which foreign limited liability company are grantzed) 4. upon filing (Date first transacted business in Florida. If prior to registration.) (See sections 605 0904 & 605 0905 F.S. to determine penalty liability) 5. 9385 Haven Ave., Rancho Cucamonga, CA 91730 (Sircei Address of Principal Office) (Sircei Address of Principal Office) (Mailing Address) (Mailing Address) (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 (City) (City) (City) (City) (City) (Registered agent and agree to act in this capacity. I further agree to complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I ms familiar with an 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: Crossroads Equipment Lease and Finance, LLC, Manager, 9385 Haven Ave., Rancho Cucamonga, CA 91730 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	2. CA		32-0480503		
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THIS GOCUMENT IS EXECUTED IN ACCORDANCE WITH SECTION 603 (1713 CT) OF PROVIDE COMPANY AND PROVIDE THAT AND PRICE INFORMATION	This document is executed	d in accordance with section 605 020	3 (1) (b) Florida Si	tatutes. Lam summe th	at any false information

James A. Barker, Manager of the Manager, Crossroads Equipment Lease and Finance, LLC

submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: CROSSROADS FINANCE, LLC

FILE NUMBER:

201529610091

FORMATION DATE:

10/22/2015

TYPE:

DOMESTIC LIMITED LIABILITY COMPANY

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of August 13, 2018.

ALEX PADILLA Secretary of State