

M200000009341

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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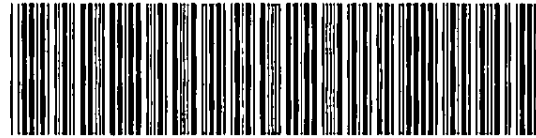
(Business Entity Name)

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10/14/20--01017--014 **125.00

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Car Capital Servicing, 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:

Jim Murphy

Name of Person

Car Capital Servicing, LLC

Firm/Company

1420 Valwood Pkwy, Suite 205

Address

Carrollton, TX 75006-6892

City/State and Zip Code

licensing@carcapitalcorp.com

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

For further information concerning this matter, please call:

Marc Bonanni

949

293-1177

Name of Contact Person

at (_____) _____

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$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. Car Capital Servicing, 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. Delaware 84-4941629
(Jurisdiction under the law of which foreign limited liability company is organized) (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. 1420 Valwood Pkwy 1420 Valwood Pkwy
(Street Address of Principal Office) (Mailing Address)
Suite 205 Suite 205
Carrollton, TX 75006-6892 Carrollton, TX 75006-6892

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

Name: CAPITOL CORPORATE SERVICES, INC.
Office Address: 515 EAST PARK AVENUE 2ND FL
TALLAHASSEE, Florida 32301
(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.

Delanie Case Delanie Case, asst. sec.
(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input type="checkbox"/> Manager	Name: <u>Car Capital Technologies, LLC</u>	<input checked="" type="checkbox"/> Manager	Name: <u>Justin Tisler</u>
<input checked="" type="checkbox"/> Member	Address: <u>1420 Valwood Pkwy</u>	<input type="checkbox"/> Member	Address: <u>1420 Valwood Pkwy</u>
<input type="checkbox"/> Authorized	Suite 205	<input type="checkbox"/> Authorized	Suite 205
Person	<u>Carrollton, TX 75006-6892</u>	Person	<u>Carrollton, TX 75006-6892</u>
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
 <input checked="" type="checkbox"/> Manager	Name: <u>James Barry Hinds</u>	 <input checked="" type="checkbox"/> Manager	Name: <u>Donald Eric Nordlund</u>
<input type="checkbox"/> Member	Address: <u>1420 Valwood Pkwy</u>	<input type="checkbox"/> Member	Address: <u>1420 Valwood Pkwy</u>
<input type="checkbox"/> Authorized	Suite 205	<input type="checkbox"/> Authorized	Suite 205
Person	<u>Carrollton, TX 75006-6892</u>	Person	<u>Carrollton, TX 75006-6892</u>
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
 <input checked="" type="checkbox"/> Manager	Name: <u>Brian Reed</u>	 <input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: <u>1420 Valwood Pkwy</u>	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	Suite 205	<input type="checkbox"/> Authorized	_____
Person	<u>Carrollton, TX 75006-6892</u>	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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.



Signature of an authorized person

Marc Bonanni, Esq.

Typed or printed name of signee

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "CAR CAPITAL SERVICING, 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 TWENTY-EIGHTH DAY OF JULY, A.D. 2020.



7879274 8300

SR# 20206432533

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 203358823

Date: 07-28-20