

| C T CORPORATION SYSTE | M | | |
|--|-----------------------------------|--|------|
| 660 East Jefferson St | reet | | |
| Requestor's Name | | | |
| Tallahassee, Florida | 32301 | | |
| Address (850) 222-1092 | | 900002651419 -09/29/9801048024 | - 1 |
| City State Zi | p Phone | ****343.75 ****343. | 75 |
| CORPO | RATION(S) NAME | 900002651419 -09/29/9801048025 ******2,50 *******2.5 | |
| | HARVEST One Funding | LIC | |
| () Profit () NonProfit () Limited Liability | () Amendment | c M nt () Merger | |
| () Foreign | () Dissolution/ | Withdrawal () Mark | |
| () Limited Partnership () Reinstatement () Limited Liability | () Annual Repo | () O | |
| Certified Copy | () Photo Copie | ies EQCUS | |
| () Call When Ready Walk In () Mail Out | () Call if Proble () Will Wait | lem () After 4:30 Pick Up | |
| Name Availability | | Please Return Extra Copy Filed Stam | r(s) |
| Document Examiner | SEP 29 1998 | Thanks, Melande | |
| Updater | | | |
| Verifier | | Thanks, Melanie | |
| Acknowledgment | _ | | |
| W.P. Verifier | | | |

CR2E031 (1-89)

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| HarvestOne Funding LLC (Name of foreign limited liability com "L.C." if not so contained in the name | | ith the words "limited company | " or their abbreviation |
|--|---------------------------------------|--|--|
| Delaware (Jurisdiction under the law of which for company is organized) | | • | ** |
| 4. September 23, 1998 (Date of Organization) | · · · · · · · · · · · · · · · · · · · | Perpetual (Duration: Year limited liability cease to exist or "perpetual") | y company will 2: 10 |
| 6. September 30, 1998 (Date first transacted bu | siness in Florida. | (See sections 608.501, 608.50 | - · |
| 7. <u>8653 Baypine Rd., Bldg. 8,</u> | Suite_100, | Jacksonville, FL 32256 | 5 |
| 8. List name, title, and business add will manage the foreign limited l NAME & ADDRESS: | iress of each m | ss of principal office) anaging member [MGRM] ny in Florida: (attach addit | or manager [MGR] who ional page if necessary) TITLE: |
| See 1 in Addendum | | | |
| | | | |
| | | | |
| | | | · - |

9. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of records in the state under the law of which it is organized. (A hotocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

| The | e undersigned member or authorized representative of a member of HarvestOne | Funding LLC |
|-----|--|--|
| | certifies; | |
| 1) | the above named limited liability company has at least two members; | |
| 2) | the total amount of cash contributed by the member(s) is | \$ <u>1,000,772.00</u> ; |
| | if any, the agreed value of property other than cash contributed by member(s) is (A description of the property is attached and made a part hereto.) | \$ <u>0.00</u> ; |
| 4) | the total amount of cash and property contributed and anticipated to be contributed by member(s) is (This total includes amounts from 2 and 3 above.) | d \$ 1,000,772.00 . |
| | Muhael 7 Hom | |
| | Signature of a member or authorized representative of a member (In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) | FILL FILL FILL FILL FILL FILL FILL FILL |
| | Michael F. Horn, Sr. | |
| | Typed or printed name of signee | The ro |

Filing Fee: \$250.00 for Application and Affidavit

Addendum

1. Name: Michael F. Horn, Sr.

Title: MGR

c. 8653 Baypine Rd., Bldg. 8, Ste. 100, Jacksonville, FL 32256

Name: John C. Pearce

Title: MGR

c. 8653 Baypine Rd., Bldg. 8, Ste. 100, Jacksonville, FL 32256

Name: John T. McManamon

Title: MGR

c. ___8653 Baypine Rd., Bldg. 8, Ste. 100, Jacksonville, FL 32256

3 SEP 29 FM 2: 10

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

| 1. | The name of the Limited Liability Company is: | |
|------------------------|--|---|
| | HarvestOne Funding LLC | |
| 2. | The name and the Florida street address of the registered agent and office are: | F: 6 |
| | C T CORPORATION SYSTEM | SI SI |
| | (Name) | P 29 FM |
| | 1200 South Pine Island Road | 图 图 |
| | Florida street address (P.O. Box NOT ACCEPTABLE) | 2:10 |
| | Plantation FL 33324 | 1. |
| | (City/State/Zip) | |
| liabi agen relat | ing been named as registered agent and to accept service of process for the above lity company at the place designated in this certificate, I hereby accept the appoint and agree to act in this capacity. I further agree to comply with the provisions thing to the proper and complete performance of my duties, and I am familiar with a gations of my position as registered agent. | ıtment as registere. of all statutes |
| СТ | CORPORATION SYSTEM | |
| | (Signature) Comie Byan, Special Asst. Secretary | . . |

Filing Fee: \$35 for Designation of Registered Agent

State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HARVESTONE FUNDING 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-FOURTH DAY OF SEPTEMBER, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE
NOT BEEN ASSESSED TO DATE.





Edward J. Freel, Secretary of State

AUTHENTICATION:

9319169

DATE:

09-24-98