

# Q10000000114

Division of Corporations

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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-8368

10 DEC - 1 AM 11: 11

ALIEN REGISTERED AGENT DESIGNATION  
Springleaf Financial Services of Florida, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

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10 DEC - 1 AM 9: 38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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K. SALY  
EXAMINER  
DEC 2 2010

**DESIGNATION OF REGISTERED AGENT AND REGISTERED OFFICE FOR  
ALIEN BUSINESS ORGANIZATION**

PURSUANT TO SECTION 607.0505, FLORIDA STATUTES, THE UNDERSIGNED ALIEN BUSINESS ORGANIZATION SUBMITS THE FOLLOWING STATEMENT IN ORDER TO DESIGNATE ITS REGISTERED AGENT AND REGISTERED OFFICE IN THE STATE OF FLORIDA:

1. Springleaf Financial Services of Florida, Inc.  
(Name of alien business organization)

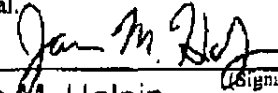
2. Illinois (State or country under which entity is organized)      3. \_\_\_\_\_ (FEI Number, if applicable)

4. 208 South LaSalle St., Suite 814, Chicago, IL 60604  
(Principal office address)

5. Name and Florida Street address of registered agent.  
CT Corporation System  
1200 South Pine Island Road  
Plantation, FL 33324

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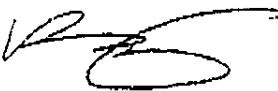
6. The street address of the registered office and the street address of the business office of the registered agent are identical.

7.   
(Signature of chairman, vice chairman, or officer)  
James M. Halpin

8. Assistant Secretary  
(Name and capacity of person signing in number 7 above)

9. Signature of registered agent:

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of section 607.0505, Florida Statutes.*

 Kimberly Breunling  
Assistant Secretary  
(Registered agent accepting appointment)      11/15/2010  
(Date)

**THE FILING OF THIS ALIEN BUSINESS ORGANIZATION FORM WITH THE FLORIDA DEPARTMENT OF STATE DOES NOT AUTHORIZE THE ABOVE REFERENCED ENTITY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.**

**FILING FEE \$35**

Make checks payable to Florida Department of State and mail to:  
Division of Corporations P. O. Box 6327 Tallahassee, FL 32314