

M09000002195

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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

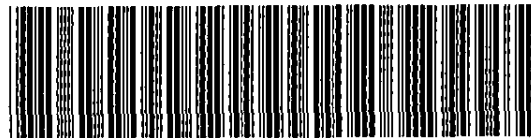
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JUN 10 2011

EXAMINER



300207818423

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

11 JUN 10 PM 2:55

RECEIVED

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

11 JUN 10 PM 1:42



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 808700 7765548

AUTHORIZATION :

COST LIMIT : \$ 30.00

FILED STATE  
SECRETARY OF CORPORATIONS  
11 JUN 10 PM 2:55

ORDER DATE : June 10, 2011

ORDER TIME : 12:53 PM

ORDER NO. : 808700-010

CUSTOMER NO: 7765548

File 2nd

FOREIGN FILINGS

NAME: STREETLINKS NATIONAL  
APPRAISAL SERVICES, LLC

\_\_\_\_ CORPORATE  
\_\_\_\_ LIMITED PARTNERSHIP  
XXX LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XXX PLAIN STAMPED COPY  
XXX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Matthew Young -- EXT# 2962

EXAMINER: \_\_\_\_\_

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: StreetLinks National Appraisal Services, LLC  
Name of Foreign Limited Liability Company

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 JUN 10 PM 2:55

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Julia Connely, Corporate Paralegal

Name of Person

StreetLinks, LLC

Firm/Company

2114 Central Street, Suite 600

Address

Kansas City, MO 64108

City/State and Zip Code

jconnely@novastarfinancial.com

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

For further information concerning this matter, please call:

Julia Connely, Corporate Paralegal at ( 816 ) 237-7375

Name of Person

Area Code & Daytime Telephone Number

### STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

### MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- ☐ \$25 Filing Fee    ☒ \$30 Filing Fee & Certificate of Status    ☐ \$55 Filing Fee & Certified Copy    ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

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

FILED STATE  
SECRETARY OF CORPORATIONS  
11 JUN 10 PM 2:55

SECTION I (1-3 must be completed)

1. Name of limited liability company as it appears on the records of the Florida Department of State: StreetLinks National Appraisal Services, LLC
2. Jurisdiction of its organization: Indiana
3. Date authorized to do business in Florida: 06/09/2009

SECTION II (4-7 complete only the applicable changes)

4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? 03/04/2011
5. New name of the limited liability company: StreetLinks LLC  
(must end with "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." or "LLC.")

6. If the amendment changes the period of duration, indicate new period of duration:  
\_\_\_\_\_
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:  
\_\_\_\_\_
8. If the amendment corrects any false statement, indicate the statement being corrected and the correction:  
\_\_\_\_\_  
\_\_\_\_\_
9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

  
Signature of a member or the authorized representative of a member

Rodney Schwatken

Typed or printed name of signer

Filing Fee: \$25.00

STATE OF INDIANA  
OFFICE OF THE SECRETARY OF STATE  
CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

I, Charles P. White, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

**STREETLINKS LLC**

duly filed the requisite documents to commence business activities under the laws of State of Indiana on March 29, 2005, and was in existence or authorized to transact business in the State of Indiana on June 07, 2011.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Seventh Day of June, 2011.

*Charles P. White*

Charles P. White, Secretary of State

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