1D Number: 00 0 792500



# STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Division of Business Services 148 W. River Street Providence, Rhode Island 02904-2615

APPLICATION FOR TRANSFER OF AUTHORITY	
CitiFinancial Servicing LLC	
(Insert full name of the entity following the transfer)	
SECTION I: TO BE COMPLETED BY ENTITY TRANSFERRING AUTHORITY	
Pursuant to the applicable provisions of the Rhode Island General Laws, 1956, as amended, the undersigned qualified foreign (check one box only):	d duly
Non-Profit Corporation or Business Corporation or Limited Liability Company or	
Limited Partnership or Limited Liability Partnership	
submits the following Application for the purpose of transferring its authority to a (check one box only):	
Limited Partnership or Limited Liability Company or Business Corporation or	
Limited Liability Partnership or Non-Profit Corporation	. T
a. The name of the entity filing this application for transfer is:  Citifinancial Security Corporation	; -:
b. The date on which the entity filing this application qualified to conduct business in the State of Rhode Island:  08/17/2012	· 
c. The jurisdiction upon transfer of authority:  Delaware	<u> </u>
d. The name of the entity following the transfer of authority is:  CitiFinancial Servicing LLC	
e. The application for transfer is filed as an accompanying certificate to the certificate of registration for a lipartnership or application for registration for a limited liability company or application for certific authority for a business corporation or application for certificate of authority for a non-profit corporat notice of registration for a registered limited liability partnership (check one box only).	ate of
f. The application for transfer is accompanied by a certificate of good standing or legal existence issued to proper officer of the state or country under the laws of which it is in proper.	y the
Form 612 05/12	

FEB 07 2013

### SECTION II: TO BE COMPLETED BY ENTITY TRANSFERRING AUTHORITY

Under penalty of perjury, I/we declare and affirm that I/we have examined this Application for Transfer of Authority, including any accompanying attachments, and that all statements contained herein are true and correct and that the undersigned is authorized to sign this certificate on behalf of the entity set forth in Section 1A.

Date: 1/29/2013		
Print Name of Other Entity	_ <u>OR</u>	Print Name of Partnership
By: Signature of Authorized Person	_	By: Signature of Partner
By: Signature of Authorized Person 17		By:Signature of Partner
		By: Signature of Partner
CitiFinancial Servicing Corporation		
Print Name of Corporation	<u>OR</u>	Print Name of Limited Liability Company
Signature of Authorized Person Livia S. Duis	_	By: Signature of Authorized Person
By:Signature of Authorized Person	_	By:Signature of Authorized Person

# Delaware

PAGE 1

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE DO HEREBY CERTIFY THAT THE CERTIFICATE OF CONVERSION OF

A DELAWARE CORPORATION "CITIFINANCIAL SERVICING CORPORATION" TO

A DELAWARE LIMITED LIABILITY COMPANY OF "CITIFINANCIAL SERVICING

LLC", WAS FILED IN THIS OFFICE ON THE TWENTY-FOURTH DAY OF

JANUARY, A.D. 2013, AT 5:57 O'CLOCK P.M.

5195834 8317

130125498

Jeffrey W. Bullock, Secretary of State **AUTHENTY CATION:** 0190191

DATE: 02-04-13

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