RI SOS Filing Number: 201751668550 Date: 10/16/2017 12:15:00 PM

(GD)

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Certificate of Authority

FOREIGN Corporation

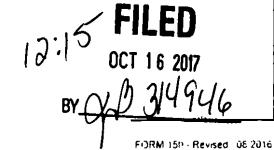
→ Filing Fee: \$310.00 minimum

Pursuant to the provisions of RIGL 7-1.2-1405, the unapplies for a Certificate of Authority to transact business							
for that purpose submits the following statement:							
1. The name of the corporation is:		<u> </u>	. <u> </u>				
			;				
American First Finance Inc.							
It is incorporated under the laws of: Kansas							
3. The name, if different, which it elects to use in Rh	ode Island is:						
(a) If the name of the corporation in its jurisdiction of "incorporated", or "limited," or an abbreviation thereo above corporate endings for use in Rhode Island:	f incorporation does not contain of, then list the name of the corp	the word "corpora oration with the ac	tion", "company", idition of one of the				
(b) If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation will qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application:							
4. The date of its incorporation is: 04/15/2013							
And the period of its duration is: CHECK ONLY ON	E BOX		~				
✓ Perpetual (on-going)			R.				
Date certain for dissolution			R.I. D BU 2017 OC				
E. The address of its minerical office in:							
5. The address of its principal office is:			91. 07.5 01.00				
3515 N Ridge Rd Ste 200, Wichita, KS 67205							
6. The name and address of the initial registered ag	ent/office of in Rhode Island:		2 250				
Agent Name			31				
InCorp Services, Inc.			ئي س				
Street Address (NOT a P.O. Box)							
222 Jefferson Blyd., Suite 200							
City/Town	State DUODE ISLAND	Zip Code					
Warwick	RHODE ISLAND	02888					

MAIL TO:

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

Phone: (401) 222-3040 Website: www.sos.ri.gov



7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are: Taking assignments of consumer credit sales contracts						
8. (a) The names and restate or country of which			optional, unless direc	tors are required under the laws of the		
NAME		T	ADDI	RESS		
Howard F. Hambleton	ioward F. Hambleton 4444 Northcrest Ro		d, Dallas, TX 75229	1		
						
			· · · · · · · · · · · · · · · · · · ·	eck the box to indicate an attachment.		
of the state or country o		corporated):	fficers (mandatory if d	directors are not required under the laws		
OFFICE	<u> </u>	NAME		ADDRESS		
PRESIDENT	Douglas R. Rippel		8425 Mystic Lake	s N, Maize, KS 67101		
VICE PRESIDENT						
TREASURER	Steve J. Spencer		2330 N Cedar Crest Dr, Wichita, KS 67223			
SECRETARY						
			Ch	eck the box to indicate an attachment.		
9. The aggregate number par value, and series, if	er of shares wi any, within a c	hich it has authority to class, is:	issue; itemized by cla	asses, par value of shares, shares without		
NUMBER OF SHARES	CLAS	S	SERIES	PAR VALUE OR STATE NO PAR VALUE		
1000	<u>A</u>			No Par Value		
		·				
10. (a) Estimate, in dollars, the value of all property to be owned by the corporation for the following year, wherever to be located within Rhode Island during the following year:						
s_2,000	1,000		\$	<u> </u>		
within this state during th	he fol lowi ng ye	ear bears to the value of	of all property of the o	perty of the corporation to be located corporation to be owned during the to obtain the percentage.		

			<u> </u>			
11. (a) Estimate, in dollars, the gross amount of business to be transacted by the corporation during the following year.	(b) Estimate, in dollars, the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year.					
s <u>ø</u>	\$_		Ø			
(c) Estimate, as a percentage, the proportion of the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year compared to the gross amount thereof which will be transacted by the corporation during the following year. Note: Divide (11b) by (11a) and multiply by 100 to obtain the percentage.						
12. This application must be accompanied by a Certificate of Good Standing/Letter of Status issued by the proper officer of the state or country under the laws of which it is incorporated that is dated within 60 days of the filing of this document.						
13. Date when the Certificate of Authority will be effective: CHECK ONLY ONE BOX						
Date received (Upon filing) Later effective date (Date must be no more than 90 days from the day of filing)						
Under penalty of perjury, I declare and affirm that I have examined this Application for Certificate of Authority, including any accompanying attachments, and that all statements contained herein are true and correct.						
Type or Print Name of Authorized Officer			Date			
Douglas R. Rippel			10-10-17			
Signature of Authorized Officer of the Corporation	-	•	- · · · · · · · · · · · · · · · · · · ·			
- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	of the following		·			

STATE OF KANSAS OFFICE OF SECRETARY OF STATE KRIS W. KOBACH

I, KRIS W. KOBACH, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity ID Number: 6875587

Entity Name: AMERICAN FIRST FINANCE INC.

Entity Type: DOM: FOR PROFIT CORPORATION

State of Organization: KS

Resident Agent: DOUG RIPPEL

Registered Office: 3515 N Ridge Rd Suite 200, WICHITA, KS 67205

was filed in this office on April 15, 2013, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.



In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of August 22, 2017

KRIS W. KOBACH SECRETARY OF STATE

Certificate ID: 970100 - To verify the validity of this certificate please visit https://www.karsas.gov/bess/flow/validate and enter the certificate ID number.

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I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

October 16, 2017 12:15 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

