

MO700000 1951

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

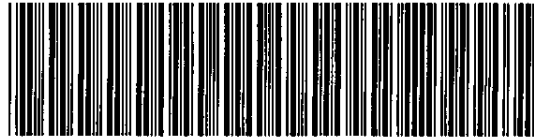
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400095469424

04/03/07-01007--008 **100.00

04/03/07--01007--010 **25.00

FILED

07 APR -3 AM 10:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Insurance Licensing Services
111 N. Railroad Street
Groesbeck, TX 76642

Date 3/30/2007

File # 2174

To:
Florida Secretary of State
Division of Corporations / Clifton Bldg
2661 Executive Center Circle
Tallahassee FL 32301

Dear Sir/Madam:

This transmittal is for filing the following document(s) on behalf of Citadel Insurance Services LLC



Certificate of Authority



Enclosed are:



Submission Cover Sheet



Application form(s)



Certificate of Good Standing



Articles of Incorporation



Check for \$ 100.00

64882



Check for \$ 25.00

63658

Please return all filed copied document(s) etc to:

ILSA
Attn: Becky Staton
111 N. Railroad
Groesbeck, TX 76642

For any questions regarding this submittal, please contact :

Becky Staton (254) 729-6192 (254) 729-2031 bstaton@licensing4insurance.com

Telephone

Fax

E-Mail

FILED
07 APR - 3 AM 10:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Citadel Insurance Services LLC
(Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Becky Staton
(Name of Person)

Insurance Licensing Services of America
(Firm/Company)

111 North Railroad Street
(Address)

Groesbeck, TX 76642
(City/State and Zip Code)

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07 APR - 3 AM 10:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Becky Staton at (254) 729-6192
(Name of Person) (Area Code & Daytime Telephone Number)

MAILING ADDRESS:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

REC'D MAR 28 2007

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

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

1. Citadel Insurance Services LLC
(Name of Foreign Limited Liability Company)

2. Utah 3. 208411049
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 2/12/2007 5. 99 Years
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. Upon Qualification
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 521 West Center Street
Pleasant Grove, UT 84062
(Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here ☒

9. The name and usual business addresses of the managing members or managers are as follows:

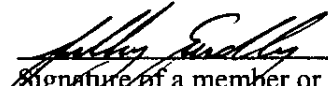
Anthony Eardley 521 West Center Street Pleasant Grove, UT 84062

David Johnson 521 West Center Street Pleasant Grove, UT 84062

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

11. Nature of business or purposes to be conducted or promoted in Florida: _____

Non-Resident Insurance Agency



Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
Anthony Eardley / Co-Chief Exec. Manager

Typed or printed name of signee

FILED
07 APR - 3 AM 10:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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:

Citadel Insurance Services LLC

2. The name and the Florida street address of the registered agent and office are:

Corporation Service Company

(Name)

1201 Hays Street

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Tallahassee

FL 32301

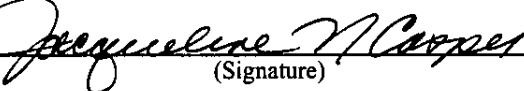
City/State/Zip

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TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Corporation Service Company

By:



(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)



**Utah Department of Commerce
Division of Corporations & Commercial Code**

160 East 300 South, 2nd Floor, PO Box 146705

Salt Lake City, UT 84114-6705

Service Center: (801) 530-4849

Toll Free: (877) 526-3994 Utah Residents

Fax: (801) 530-6438

Web Site: <http://www.commerce.utah.gov>

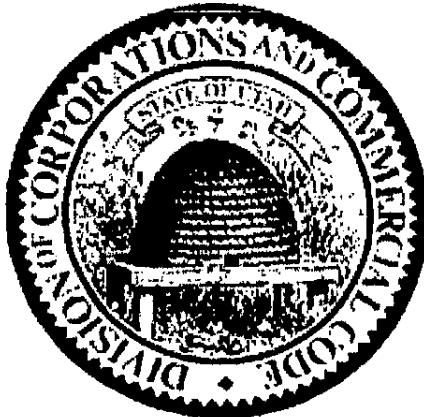
03/20/2007

6472696-016003202007-488835

CERTIFICATE OF EXISTENCE

Registration Number:	6472696-0160
Business Name:	CITADEL INSURANCE SERVICES LC
Registered Date:	January 30, 2007
Entity Type:	LLC - Domestic
Current Status:	Good Standing

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division; and, that Articles of Dissolution have not been filed.



Kathy Berg
Director
Division of Corporations and Commercial Code