

MO8 0000000132

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

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MAIL

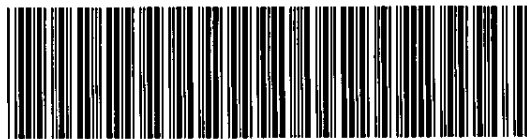
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

T. CLINE

JAN - 9 2008

EXAMINED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 JAN - 8 PM 12:25

MO8-132



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 18, 2007

KEITH LOWENTHAL
1956 NORTHPOINT BLVD., #1950
TALLAHASSEE, FL 32308

SUBJECT: ADVISORS EXCEL, LLC
Ref. Number: W07000061090

We have received your document for ADVISORS EXCEL, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Regulatory Specialist II

Letter Number: 007A00070586

2008 JAN -8 PM 12: 25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED



RESUBMISSION

FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 18, 2007

FORM-A-CORP
4400 PGA Blvd #900
PALM BEACH GARDENS, FL 33410.
SUBJECT: ADVISORS EXCEL, LLC
Ref. Number: W07000061090

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Tammi Cline
Regulatory Specialist II

Letter Number: 007A00070586

2008 JAN - 8 PM 12: 25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

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

1. Advisors Excel, LLC

(Name of Foreign Limited Liability Company; must include "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 include "Limited Liability Company," "L.L.C.," "LLC.")

2. Kansas

(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____

(FEI number, if applicable)

4. 01/04/2005

(Date of Organization)

5. 11/01/2037

(Duration: Year limited liability company will cease to exist or "perpetual")

6. 11/01/2007

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

7. 825 N. Kansas Avenue, Suite 510

Topeka, KS 66612

(Street Address of Principal Office)

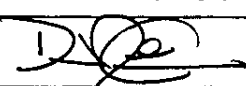
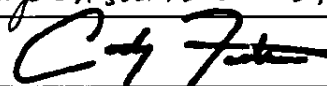
8. If limited liability company is a manager-managed company, check here

9. The name and usual business addresses of the managing members or managers are as follows:
David Callanan 825 N. Kansas Avenue, Suite 510, Topeka, KS 66612

Cody G. Foster 825 N. Kansas Avenue, Suite 510, Topeka, KS 66612

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: registered/licensed
so we may receive override compensation for Annuity policies.

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.)

David Callanan & Cody G. Foster

Typed or printed name of signee

2008 JAN -8 PM 12: 25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

**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:

Advisors Excel, LLC

If name unavailable, the alternate name to be used in the state of Florida is:

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

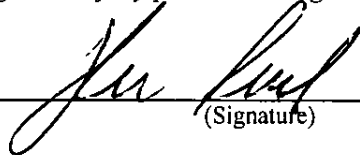
Form-A-Corp
(Name)
4400 PGA Blvd, Suite 900
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Palm Beach Gardens FL 33410
City/State/Zip

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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.

By:



(Kevin Rubel-Manager)

(Signature)

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

STATE OF KANSAS
OFFICE OF
SECRETARY OF STATE
RON THORNBURGH

To all to whom these presents shall come, Greetings:

I, RON THORNBURGH, Secretary of State of the state of Kansas, do hereby certify that I am the custodian of records of the State of Kansas relating to business entities and that I am the proper official to execute this certificate.

Entity Name: ADVISORS EXCEL, LLC

Structure: KANSAS LIMITED LIABILITY COMPANY

Business Entity ID Number: 3725553

Was filed in this office on January 04, 2005 and has complied with the applicable provisions of the laws of the state of Kansas and on this date is in good standing and authorized to transact business or to conduct affairs within this state



In testimony whereof: I hereto set my hand and cause to be affixed my official seal. Done at the City of Topeka, this 13 of December, 2007.

A handwritten signature in black ink that reads "Ron Thornburgh".

RON THORNBURGH
SECRETARY OF STATE

Certificate ID: 123753 - To verify the validity of this certificate please visit <https://www.accesskansas.org/businessentity/validate.html> and enter the certificate ID number.