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AND AND 20 AM II: 07
SECRETARY OF STATE
ANASSEE, FLORIDA

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EXAMINER

COVER LETTER

то:	Registration Section Division of Corporations		
SUB	JECT: Goldleaf Surety Se	rvices, LLC of Limited Liability Company)	_
Florid		ted Liability Company for Authorization to a are submitted to register the above reference orida	
Pleas	e return all correspondence concerning	this matter to the following:	
	Jack Anderson		
	, , , , , , , , , , , , , , , , , , ,	(Name of Person)	A44_PA42_A44_A44_A
	Goldleaf Surety Se	ervices, LLC	32. 31. 31.
		(Firm/Company)	
	3246 E. Hwy. 7, Sı	uite 150	TARY P
		(Address)	
	Montevideo, MN 5	66265 City/State and Zip Code)	PE STATE OF STATE
	`	,	
For fu	urther information concerning this mat	ter, please call:	
	Jack Anderson	at (320) 269-3144	
	(Name of Person)	(Area Code & Daytime Telepho	one Number)
	MAILING ADDRESS:	STREET ADDRESS:	
	Division of Corporations P.O. Box 6327	Division of Corporations	
	Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclo	osed is a check for the following amour \$125.00 Filing Fee \$130.00 Filing Certif	Fee & \$\int\$\$\$155.00 Filing Fee & \$\int\$\$\$\$\$\$160.00 \$	Filing Fee, Certificate of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Goldleaf Surety Services, LLC (Name of Foreign Limited Liability Company; must inclu	de "Limited Liability Com	npany," "L.L.C.," or "LLC.	")
(If name unavailable, enter alternate name adopted for the purpos consent of the managers or managing members adopting the alter Company," "L.L.C.," "LLC.")			
	26-0158704		
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI num	iber, if applicable)	
4. <u>02/06/2007</u> 5	Perpetual		
(Date of Organization)	(Duration: Year limite exist or "perpetual")	d liability company will ce	ase to
6. None			-2 -11
(Date first transacted business in Flo (See sections 608.501 & 608.502 F.S.	rida, if prior to registration to determine penalty liabi	n.) lity)	3 11 3 3 3 3 3 3 3 3 3 3
_{7.} 3246 E. Hwy. 7, Suite 150			20
Montevideo, MN 56265			
	of Principal Office)		The same of the sa
8. If limited liability company is a manager-managed	company, check here	☑ ŞÃ	10
9. The name and usual business addresses of the mana	nging members or man	nagers are as follows:	
Goldleaf Financial, Ltd.	<i></i>		
3246 E. Hwy. 7, Suite 150	**************************************		
Montevideo, MN 56265			
10. Attached is an original certificate of existence, no more than 90 d the jurisdiction under the law of which it is organized. (A photocopy ranslation of the certificate under oath of the translator must be subm	is not acceptable. If the cer		
11. Nature of business or purposes to be conducted or	promoted in Florida:	Surety - Broker	***************************************
Signature of a member or an aut (In accordance with section 608.408(3), F.: an affirmation under the penalties of perjulack Anderson	S., the execution of this docu	ment constitutes	

Typed or printed name of signee

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:	
Goldleaf Surety Services, 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:	SECRETAR ALLAHASS
Registered Agent Solutions, Inc.	20 A317 A53E
(Name)	E E
155 Office Plaza Dr. Suite A Florida Street Address (P.O. Box NOT ACCEPTABLE)	AHII: 07 OF STATE E, FLORION
Tallahassee 32301 FL	
City/State/Zip	

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.

Jonza G., Tranya Gionzalez, Asst. Secretary (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 Minnesota

SECRETARY OF STATE

Certificate of Good Standing

Mark Ritchie, Secretary of State of Minnesota, do certify The limited liability company listed below is a limited liability company formed or registered to do business under the laws of Minnesota; the limited liability company was formed by the filing of articles of organization or registered to do business by filing an application for a certificate of authority with the Office of the Secretary of State on the date listed below; the limited liability company is governed by Chapter 322B of Minnesota Statutes; and this limited liability company is authorized to do business as а limited liability company at the time this certificate is issued.

Name: Goldleaf Surety Services, LLC

Date Formed or Registered: February 6, 2007

State of Organization: Minnesota

This certificate has been issued on July 21, 2008.



Mark Kitchie
Secretary of State.