M0900000415

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

OO APP II. AM 8: 53

109-1405C

T. HAMPTON

APR 1 5 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Dealer Warranty Services, LLC				
(Name of Limited Liabil	ty Company)			
The enclosed "Application by Foreign Limited Liability ComFlorida," Certificate of Existence, and check are submitted to liability company to transact business in Florida				
Please return all correspondence concerning this matter to the	: following:			
Heather Hill				
(Name of Person)				
Marathon				
(Firm/Compar	ny)			
P.O. Box 961				
(Address)				
O'Fallon, IL 62269				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
Heather Hill at (80	0 ₎ 205-8988x122			
	Code & Daytime Telephone Number)			
Division of Corporations P.O. Box 6327 Clifton F Tallahassee, FL 32314 Clifton F	T ADDRESS: of Corporations Building ecutive Center Circle see, FL 32301			
Enclosed is a check for the following amount: [\$\sum \\$125.00 \text{ Filing Fee} \sum \\$130.00 \text{ Filing Fee & } \sum \\$155.00 \text{ Certificate of Status}	00 Filing Fee & \$\sum \$160.00 Filing Fee, Certificate Certified Copy of Status & Certified Copy			



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SECRETARY OF STATE TALLAHASSEE, FLORIDA

March 25, 2009

HEATHER HILL MARATHON P O BOX 961 O'FALLON, IL 62269

SUBJECT: DEALER WARRANTY SERVICES, LLC

Ref. Number: W09000014050

We have received your document for DEALER WARRANTY SERVICES, 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):

You must submit a copy of the written consent of the managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton Regulatory Specialist II Registration/Qualification Section

Letter Number: 309A00010096

Dealer Warranty Services, LLC

P.O. Box 961 O'Fallon, IL 62269

April 6, 2009

Attn: Tammy Hampton Regulatory Specialist II Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Dealer Warranty Services, LLC

Ref. Number: W09000014050

Dear Ms. Hampton:

As per your letter dated March 25, 2009, enclosed for your review are the following documents:

- 1. Application by Foreign Limited Liability Company for Authorization to Transact Business.
- 2. Certificate of Designation of Registered Agent/Office
- 3. Written Consent to Adopt Alternate Name for Use in the State of Florida
- 4. One Exact Copy

If you require any further information, please feel free to contact me at 800-205-8988 x 122 or via e-mail at hhill@marathonfic.com. Thank you for your time and consideration.

Sincerely,

Heather Hill

Compliance Associate

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or Managing	
Members of Dealer Warronty Services, LLC (Name of Limited Liability Company)	و
a limited liability company duly organized and existing under the laws of	
(State or Country of Organization)	
Because the name of this foreign limited liability company does not satisfy the	
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the	
following name to transact business in the state of Florida:	
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or L.L.C.)	-·
Date: 3 31 09 Signature(s) of Manager(s) and/or Managing Member(s):	-
	
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CR2E122 (7/07)

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. Dealer Warranty Services, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC."		
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC	C.") ¯	-
Certus Assurance Group, LLC		_
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a co consent of the managers or managing members adopting the alternate name. The alternate name must include "Limit Company," "L.L.C.," "LLC.")		
_{2.} Missouri _{3.} 20-3606971		
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)		-
4. 9/29/2005 (Date of Organization) 5. perpetual (Duration: Year limited liability company will exist or "perpetual")	cease to	-
6(Date first transacted business in Florida, if prior to registration.)		-
(See sections 608.501 & 608.502 F.S. to determine penalty liability)	09	SEVIO
_{7.} 3710 Mueller Rd.	09 APR	- 22
St. Charles, MO 63301-8011	Ę	ETAR.
(Street Address of Principal Office)	2	
8. If limited liability company is a manager-managed company, check here	9 8: 53	STATE
9. The name and usual business addresses of the managing members or managers are as follows:	~~	35
Jeffrey Zykan 3710 Mueller Rd. St. Charles, MO 63301		
Theodore B. Conrad 3710 Mueller Rd. St. Charles, MO 63301		-
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custs the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language ranslation of the certificate under oath of the translator must be submitted.)	-	cords in
11. Nature of business or purposes to be conducted or promoted in Florida: Marketer of ve	hicle	.
service contracts.		
		•
Signature of Antember 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.)		
JEFF ZyKAN		
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:
Dealer Warranty Services, LLC
If name unavailable, the alternate name to be used in the state of Florida is: Cers Assurance Group, 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 32301 FL City/State/Zip
Corporation Service Company (Name) 1201 Hays Street Florida Street Address (P.O. Box NOT ACCEPTABLE) Tallahassee 32301 FL

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.

Ling Milian (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 MISSOURI



Robin Carnahan Secretary of State

CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

DEALER WARRANTY SERVICES, LLC LC0688621

was created under the laws of this State on the 29th day of September, 2005, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 18th day of March, 2009

Secretary of State

Certification Number: 11556023-1 Reference:

Verify this certificate online at http://www.sos.mo.gov/businessentity/verification