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S. HAWKES

JUN 4 - 2009

EXAMINER

#### **COVER LETTER**

TO:	Registration Section Division of Corporati	ons			
SUBJ	ЕСТ:		vice Group of America, L	LC	
				Transact Business in Florida," Certificate of lity company to transact business in Florida	
Please	return all corresponden	ce concerning this ma	atter to the following:		
		Sharon Owens			
	<u></u>		Name of Person		
American Insurance Administrators, LLC				LLC	
Firm/Company					
2536 Countryside Blvd. Suite 501					
Address					
	Clearwater, Florida 33763  City/State and Zip Code				
			Onyrotate and Zip Code		
	Sowens@amerilife.net  E-mail address: (to be used for future annual report notification)				
		E-mail address: (	to be used for future annual report no	otification)	
For fu	rther information concer	ning this matter, plea	se call:		
	Sha	aron Owens	at ( 727 )	726-0726	
	Nar	ne of Person	Area Code & Daytime Telepho	one Number	
	MAILING ADDRES Division of Corporati Registration Section P.O. Box 6327 Tallahassee, FL 3231	ons	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
Enclo	sed is a check for th	e following amou	int:		
	\$125.00 Filing Fee	\$130.00 Filin			

### 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: National Service Group of America, 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.") Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 09/03/08 (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") Upon Filing (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 2536 Countryside Blvd. Suite 501., Clearwater, FL 33763 (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: AL Marketing LLC 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: marketing of insurance products Signature of a member of 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.) Timothy O North, Member

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:	10 G M
National Service Group of America, LLC	FG 1
If unavailable, the alternate to be used in the state of Florida is:	1-3 P
2. The name and the Florida street address of the registered agent and office are:	2.09
Nathan R. Hightower, Esq.	
(Name)	<del>-</del>
2536 Countryside Blvd., Suite 501, Clearwater, FL 33763 Florida Street Address (P.O. Box NOT ACCEPTABLE)	-
FI.	
City/State/Zip	-
Having been named as registered agent and to accept service of process for the above so liability company at the place designated in this certificate, I hereby accept the appointing agent and agree to act in this capacity. I further agree to comply with the provisions of relating to the proper and complete performance of my duties, and I am familiar with an obligations of my position as registered agent as provided for in Chapter 608, Florida S (Signature)	nent as registered all statutes nd accept the

Filing Fee for Application

**Certified Copy (optional)** 

**Designation of Registered Agent** 

**Certificate of Status (optional)** 

\$ 100.00

\$ 25.00

\$ 30.00 \$ 5.00

## Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "NATIONAL SERVICE GROUP OF AMERICA,

LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND

IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF

MAY, A.D. 2009.

O9 JUN -3 FN 2: 09

1595290 8300

090530174

Jeffrey W. Bullock, Secretary of State AUTHENT CATION: 7326056

DATE: 05-27-09

You may verify this certificate online at corp.delaware.gov/authver.shtml