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(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
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(Bu	siness Entity Nam	ne)
(Do	cument Number)	
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#### **COVER LETTER**

TO:	Registration Section
	Division of Corporations

SUBJECT: Berkshire Risk 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:

(Name of Person)	SEC TALL
Chubb Licensing Services LLC	T HAY
(Firm/Company)	SSEE, F
15 Mountain View Road	21.50
(Address)	39 RIDA
Warren, NJ 07059	
(City/State and Zip Code)	

For further information concerning this matter, please call:

Steve Course	at ( 908 ) 903-5760
(Name of Person)	(Area Code & Daytime Telephone Number)
MAILING ADDRESS:	STREET ADDRESS:
Division of Corporations	Division of Cornorations

Division of Corporations
P.O. Box 6327
Cliftor
Tallahassee, FL 32314
Tallah

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the	following amount:		
■\$125.00 Filing Fee	<b>✓</b> \$130.00 Filing Fee &	□\$155.00 Filing Fee &	■\$160.00 Filing Fee, Certificate
	Certificate of St	tatus Certified Copy	of Status & Certified Copy



### CHUBB LICENSING SERVICES LLC

15 Mountain View Road, P.O. Box 1615, Warren, New Jersey 07061-1615 • T: 800 824-6717 F: 908 903-4245

May 22, 2007

Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE: Certificate of Authority STATE OF FLORIDA

Please issue a Certificate of Authority to Berkshire Risk Services, LLC so that the organization can transact business in the state of Florida. Enclosed are the following:

- 1. Application for Certificate of Authority
- 2. Certificate of Existence
- 3. Chubb Licensing Services check in the amount of \$130

If there is any need for this application to be returned, please return to

Chubb Licensing Services LLC 15 Mountain View Road Warren, NJ 07059 ATTN: Steve Lawrence

Thank you for your cooperation.

Steve Lawrence Licensing Associate Chubb Licensing Services LLC (908) 903-2367

Encl.

## 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:

Berkshire Risk Services, LLC	
(Name of Foreign Limited L	iability Company)
Kansas	20-8682003
(Jurisdiction under the law of which foreign limited liability company is organized)	( FEI number, if applicable)
3/27/07	perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
N/A	
(Date first transacted business in Flo (See sections 608.501 & 608.502 F.S.	rida, if prior to registration.) to determine penalty liability)
7300 College Blvd. Suite 500	. TA
Overland Park, KS 66210	ECRE LL AH
(Street Address	of Principal Office)
If limited liability company is a manager-managed	company, check here
in infliced flatinity company is a manager-managed	
The name and usual business addresses of the mana	aging members or managers are as follows:
Christopher John Kirwan, Manager & Me	mber $\frac{100}{5}$
7300 College Blvd. Ste 500 Overland Park	K\$ 66210
7500 College Biva. Sie 500 Overland i dir	, NO 00210
Attached is an original certificate of existence, no more than 90 c	
e jurisdiction under the law of which it is organized. (A photocopy nslation of the certificate under oath of the translator must be subr	
Nature of hyginess or numerous to be conducted or	numatad in Florida.
. Nature of business or purposes to be conducted or	promoted in Fiorida.
Insurance Agency	4
- Constant	<u> </u>
	thorized representative of a member. S., the execution of this document constitutes
an affirmation under the penalties of perju	
Christopher	

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:

#### Berkshire Risk Services, LLC

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

Corporation Service Co	ompany			
	(Name)		-	
1201 Hays Street		SEC! TALL/	2001	u l
Florida Street Add	dress (P.O. Box <u>NOT</u> ACCEPTABLE)	E [s.a)	MAY 30	
Tallahassee	<sub>FL</sub> 32301	E O	7	اً ا
	City/State/Zip	STATI	. 12: 3	

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.

Signature) / J / D

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

## 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: BERKSHIRE RISK SERVICES, LLC

Structure: KANSAS LIMITED LIABILITY COMPANY

Business Entity ID Number: 4053534

Was filed in this office on March 27, 2007 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 07 of May , 2007.

RON THORNBURGH SECRETARY OF STATE

Certificate ID: 76998 - To verify the validity of this certificate please visit https://www.accesskansas.org/businessentity/validate.html and enter the certificate ID number.