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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

07 JUN -1 PM 12:04

APPROVED  
AND  
FILED

B. McKnight JUN 04 2007

# BUTLER REGULATORY CONSULTANTS, INC.

May 31, 2007

Florida Secretary of State  
New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

DHL EXPRESS

## RE: E.L.M. INSURANCE BROKERS, INC. CERTIFICATE OF AUTHORITY

Gentlemen:

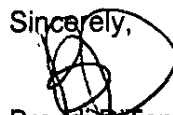
Please be advised that we assist E.L.M. Insurance Brokers, Inc., with their regulatory requirements.

We are enclosing the following documents pertaining to the referenced:

1. Cover Letter, in duplicate.
2. Application By Foreign Corporation For Authorization To Transact Business In Florida, in duplicate.
3. Registered Agent Consent Form, in duplicate.
4. Certificate of Status issued by the California Secretary of State for E.L.M. Insurance Broekrs, Inc.
5. Check No. 23939 in the amount of \$78.75 representing the filing fee.
6. Self addressed envelope for the return of the Certificate of Authority.

Please contact the undersigned with any questions.

Sincerely,



Brandi DiTommaso



## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** E.L.M. Insurance Brokers, Inc.

(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Doris A. Butler

(Name of Person)

Butler Regulatory Consultants, Inc.

(Firm/Company)

P.O. Box 2327

(Address)

La Habra, CA 90632-2327

(City/State and Zip code)

For further information concerning this matter, please call:

Doris A. Butler

(Name of Person)

at ( 562 ) 697-2035

(Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☒ \$78.75 Filing Fee &  
Certificate of Status

☐ \$78.75 Filing Fee &  
Certified Copy

☐ \$87.50 Filing Fee,  
Certificate of Status &  
Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. E.L.M. Insurance Brokers, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. California

(State or country under the law of which it is incorporated)

3. 95-4831123

(FEI number, if applicable)

4. 08-20-2000

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. N/A

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1990 East Grand Avenue, Suite 210 El Segundo, CA 90245

(Principal office address)

P.O. Box 2668 El Segundo, CA 90245

(Current mailing address)

8. Insurance Agency

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Paracorp Incorporated

Office Address: 236 East 6th Avenue

Tallahassee

(City)

, Florida 32303

(Zip code)

07 JUN - 1 PM 12:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

10. **Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

\_\_\_\_\_  
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

APPROVED  
AND  
FILED  
07 JUN - 1 PM 12:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: Frederick John Fisher

Address: 1990 East Grand Avenue, Suite 210  
El Segundo, CA 90245

Vice Chairman: N/A

Address: \_\_\_\_\_

Director: Frederick John Fisher

Address: 1990 East Grand Avenue, Suite 210  
El Segundo, CA 90245

Director: N/A

Address: \_\_\_\_\_

**B. OFFICERS**

President: Frederick John Fisher

Address: 1990 East Grand Avenue, Suite 210  
El Segundo, CA 90245

Vice President: N/A

Address: \_\_\_\_\_

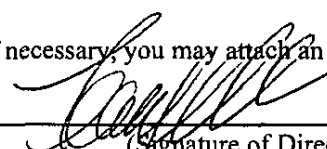
Secretary: Frederick John Fisher

Address: 1990 East Grand Avenue, Suite 210 El Segundo, CA 90245

Treasurer: Frederick John Fisher

Address: 1990 East Grand Avenue, Suite 210 El Segundo, CA 90245

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.   
(Signature of Director or Officer listed in number 12 of the application)

14. Frederick John Fisher, President

(Typed or printed name and capacity of person signing application)

# STATE OF FLORIDA

## REGISTERED AGENT CONSENT FORM

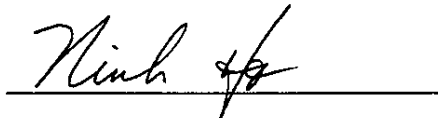
**DATE:** MAY 14, 2007

**ENTITY NAME:** E.L.M. INSURANCE BROKERS, INC.

### REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated  
236 East 6<sup>th</sup> Avenue  
Tallahassee, FL 32303

**Paracorp Incorporated**, having been designated to act as Statutory Agent, hereby consents to act in that capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statutes.



Ninh Ho, Assistant Secretary  
Paracorp Incorporated

07 JUN - 1 PM 12:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

07 JUN - 1 PM 12:00

APPROVED  
AND  
FILED

**State of California**  
**Secretary of State**

**CERTIFICATE OF STATUS  
DOMESTIC CORPORATION**

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

That on the **7th day of August, 2000, E.L.M. INSURANCE BROKERS, INC.** became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.

**IN WITNESS WHEREOF**, I execute  
this certificate and affix the Great Seal  
of the State of California this day of  
March 1, 2007.



*Debra Bowen*

**DEBRA BOWEN**  
Secretary of State

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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AND  
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