F09000003339

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

T. Burch AUG 21 2009

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: First Star Insurance Solutions Group, 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:

(Name of Person)

Capitol Services Corporate Filings Team
(Firm/Company)

800 Brazos, Suite 400
(Address)

Austin, Texas 78701
(City/State and Zip code)

For further information concerning this matter, please call:

(Name of Person) at (800) 345-4647 (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

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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. First Star Insurance Solutions Group, 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. CA.
(State or country under the law of which it is incorporated)

3. 27-0213649
(FEI number, if applicable)

4. 04-20-2009
(Date of incorporation)

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

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

7. 437 S. Hwy 101, Suite 212 Solana Beach CA 92075
(Principal office address)

437 S. Hwy 101, Suite 212 Solana Beach 92075
(Current mailing address)

8. Insurance Sales
(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: Capitol Corporate Services, Inc.

Office Address: 155 Office Plaza Drive, Suite A

Tallahassee (City), Florida 32301 (Zip code)

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.

Delanie Case, asst. sec.
(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.

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

A. DIRECTORS

Chairman: see below

Address: _____

_____

Vice Chairman: _____

Address: _____

_____

Director: _____

Address: _____

_____

Director: _____

Address: _____

_____

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TALLAHASSEE, FLORIDA

B. OFFICERS

President: Jeffrey S. Patterson

Address: 437 S. Hwy 101, Suite 212

Solana Beach CA 92075

Vice President: Badriah Nordstrom

Address: 437 S. Hwy 101, Suite 212

Solana Beach CA 92075

Secretary: Karen Davis

Address: 437 S. Hwy 101, Suite 212 Solana Beach CA 92075

Treasurer: Karen Davis

Address: 437 S. Hwy 101, Suite 212 Solana Beach CA 92075

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

13. _____ 8.20.09

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

14. Jeffrey S. Patterson President

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

State of California
Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

FIRST STAR INSURANCE SOLUTIONS GROUP, INC.

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TALLAHASSEE, FLORIDA

FILE NUMBER:	C3119169
FORMATION DATE:	04/20/2009
TYPE:	DOMESTIC CORPORATION
JURISDICTION:	CALIFORNIA
STATUS:	ACTIVE (GOOD STANDING)

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

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of August 14, 2009.

Debra Bowen

DEBRA BOWEN
Secretary of State