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COVER LETTER

TO: Registration Section Division of Corporations				
Long & Foster Insuran	ice Agency, Inc.			
	Name of corporation	ı - must include suffix		
Dear Sir or Madam:				
The enclosed "Application by Fore "Certificate of Existence," or "Cert above referenced foreign corporation	ificate of Good Sta	nding" and check are sub		
Please return all correspondence co	ncerning this matte	r to the following:		
Bryn Olsen				
	Name of	Person		
HomeServices of America, Inc.				
	Firm/Con	npany		
333 South 7th Street, FL 27				
	Addr	ess		
Minneapolis, MN 55402				
	City/State a	nd Zip code		
legal@homeservices.com	11 / 1	<i>r. c.</i>		
E-man a	aaress: (to be usea	for future annual report	notification)	
For further information concerning	this matter, please	call:		
Bryn Olsen	612	336-5446	336-5446	
Name of Person	at (at Coc		phone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a check for the following	ng amount:			
	Filing Fee & Concate of Status	3 \$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.

(Enter name of c	corporation; must include "INCORPORATI Corp." "Inc," "Co," or "Corp.")	ED." "COMPA	NY," "CORPORATION,"	
Virginia	lable in Florida, enter alternate corporate na			
(State or count	ry under the law of which it is incorporated	_	(FEI number, if appl	licable)
12/06/1973 4.		5.		
(Date	e of incorporation)	(I)	Date of duration, if other th	nan perpetual)
14501 George Ca	(Date first transacted busine (SEE SECTIONS 607.1501 & 60 arter Way, Chantilly, VA 20151			.)
	(Pri treet, FL 27, Attn Legal Dept, Minneapolis	incipal office add , MN 55402	dress)	2018 SE SECRE ALLA
	(Current m	nailing address, if	f different)	TASS
8. Name and stre	et address of Florida registered agent:	(P.O. Box <u>NO</u>	<u>or</u> acceptable)	Y OF
Name:	C T Corporation System			AMII: 03 Y OF STATE SEE, FLORIS
Office Address:	1200 South Pine Island Road			
	Plantation	, Flor	33324 -ida	
	(City)		(Zip code)	

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.

Michele Miller, Asst. Secretary

(Registered agent's signature)

10. 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.

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

A. DIRE	Ronald J. Peltier
Chairman:	333 South 7th Street, FL 27
Address: _	vlinneapolis, MN 55402
Vice Chair	Jeffrey S. Detwiler man:
Address: _	14501 George Carter Way
C	Chantilly, VA 20151
C. '	Dana D. Strandmo
Address:	333 South 7th Street, FL 27
_	Minneapolis, MN 55402
Director:	
Address: _	
_	ALCO SECOND TO THE SECOND TO T
B. OFFI	90 × 0
President:	Patrick M. Bain 14501 George Carter Way
Address: _	14501 George Carter Way
· · · · · · · · · · · · · · · · · · ·	Chantilly, VA 20151
Vice Presid	Jeffrey S. Detwiler
Address:	14501 George Carter Way
_	Chantilly, VA 20151
Secretary:	Michael T. Browne
_	333 South 7th Street, FL 27, Minneapolis, MN 55402
Treasurer:	Bruce L. Enger
	14501 George Carter Way, Chantilly, VA 20151
NOTE: 1	f necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer
The office are true ar a third deg	Signature of Director or Officer er or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein and that he or she is aware that false information submitted in a document to the Department of State constitutes gree felony as provided for in s.817.155, F.S. and T. Browne, Secretary

Commontorealth of Hirginia



State Corporation Commission

CERTIFICATE OF GOOD STANDING

I Certify the Following from the Records of the Commission:

That LONG & FOSTER INSURANCE AGENCY, INC. is duly incorporated under the law of the Commonwealth of Virginia;

That the date of its incorporation is December 6, 1973;

That the period of its duration is perpetual; and

That the corporation is in existence and in good standing in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date: August 27, 2018

Joel H. Peck, Clerk of the Commission

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