



THE UNITED STATES
CORPORATION
COMPANY

10000000002287

ACCOUNT NO. : 072100000032

REFERENCE : 882677 7176028

AUTHORIZATION :

Patricia Pignato

COST LIMIT : \$ 125.00

ORDER DATE : October 31, 2000

ORDER TIME : 11:39 AM

ORDER NO. : 882677-005

CUSTOMER NO: 7176028

CUSTOMER: Ms. Arleen T. Tavares
Insurance Licensing Services
111 N. Railroad

100003453301--7

Groesbeck, TX 76642

FOREIGN FILINGS

NAME: NASD INSURANCE AGENCY LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Darlene Ward

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

NOV - 6 PM 2:54
TO AGENCY OF FILING
SUFFICIENCY OF FILING

00 NOV - 6 PM 2:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

11-11-00

OCT-19-2000 17:56

CSC

212 299 9103 P.03/05

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. NASE INSURANCE AGENCY LLC
(Name of foreign limited liability company)
2. NEW YORK
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 13-4107366
(FEI number, if applicable)
4. 03-15-00
(Date of Organization)
5. PERPETUAL
(Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon filing.
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 33 WHITEHALL STREET
NEW YORK, NY 10004
(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:
KENNETH M. MAHER 33 WHITEHALL STREET, NEW YORK, NY 10004 MANAGER
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: ANY AND ALL LAWFUL
BUSINESS INCLUDING INSURANCE ADVISORY

Kenneth M. Maher
Signature of a member or 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.)

KENNETH M. MAHER, MANAGER

Typed or printed name of signee

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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:

NASD INSURANCE AGENCY LLC

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

Corporation Service Company

(Name)

1201 Hays Street

Florida street address (P.O. Box **NOT** ACCEPTABLE)

Tallahassee

FL

32301

City/State/Zip

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, F.S..

Mary L. Viner 10/31/00.
(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

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TALLAHASSEE, FLORIDA

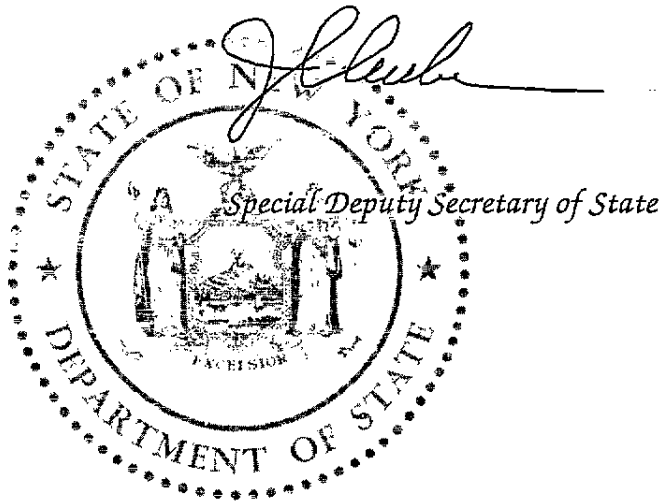
APPROVED
AND
FILED

State of New York } **ss:**
Department of State

I hereby certify, that NASD INSURANCE AGENCY LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 03/15/2000, and that the Limited Liability Company is subsisting so far as shown by the records of the Department.

*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 31st day of October
two thousand.*

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