

MO1000002419

TRANSMITTAL LETTER

To: Registration Section
Division of Corporations

SUBJECT: VALMARK INSURANCE AGENCY, LLC
(Name of corporation - must include suffix)

Dear Sir or Madam: 00789-0060B-00671

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:

KATHEE TSCHUDY
(Name of Person)

VALMARK INSURANCE AGENCY, LLC
(Firm/Company)

3690 ORANGE PL. #300
(Address)

BEACHWOOD, OH 44122
(City/State/Zip)

NJH

01 OCT 26 PM 4:45
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-09/04/01--01094--018
*****87.50 *****87.50

Should you need to call someone concerning this matter, please call:

KATHEE TSCHUDY at 216, 765-1999 X.3350
(Name of Person) (Area Code & Daytime Telephone Number)

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-10/09/01--01012--018
*****102.50 *****102.50

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Registration 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

2CC



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

September 5, 2001

KATHEE TSCHUDY
VALMARK INSURANCE AGENCY, LLC
3690 ORANGE PL, #300
BEACHWOOD, OH 44122

SUBJECT: VALMARK INSURANCE AGENCY, LLC
Ref. Number: W01000020637

We have received your document for VALMARK INSURANCE AGENCY, LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must complete the attached application to qualify a foreign LLC to transact business in Florida. The application submitted is for a Corporation.,

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

There is a balance due of \$72.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Michelle Hodges
Document Specialist

Letter Number: 701A00050142



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

October 9, 2001

KATHEE TSCHUDY
VALMARK INSURANCE AGENCY, LLC
3690 ORANGE PL, #300
BEACHWOOD, OH 44122

SUBJECT: VALMARK INSURANCE AGENCY, LLC
Ref. Number: W01000020637

We have received your document for VALMARK INSURANCE AGENCY, LLC and your check(s) totaling \$190.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Michelle Hodges
Document Specialist

Letter Number: 301A00056313

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. Valmark Insurance Agency, LLC
(Name of foreign limited liability company)
2. Ohio
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 34-1924305
(FEI number, if applicable)
4. 5-17-2000
(Date of Organization)
5. Perpetual
(Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon Qualification
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 3690 Orange Pl. #300
Beachwood, OH 44122
(Street address of principal office)

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TALLAHASSEE, FLORIDA

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:

Lawrence S. Rybka - 1500 Corporate Ctr. #203
Wellington, FL 33414

Josephine Rybka - "

Lawrence J. Rybka - 3690 Orange Pl. #300
Beachwood, OH 44122

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: Insurance
agency - Life, Health, Variable products

Lawrence J. Rybka
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.)

Lawrence J. Rybka

Typed or printed name of signer

**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:

Valmark Insurance Agency, LLC

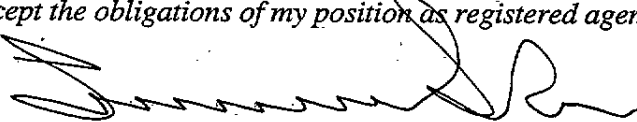
2. The name and the Florida street address of the registered agent and office are:

Lawrence S. Rybka
(Name)

1500 Corporate Ctr. # 203
Florida street address (P.O. Box NOT ACCEPTABLE)

Wellington FL 33414
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..



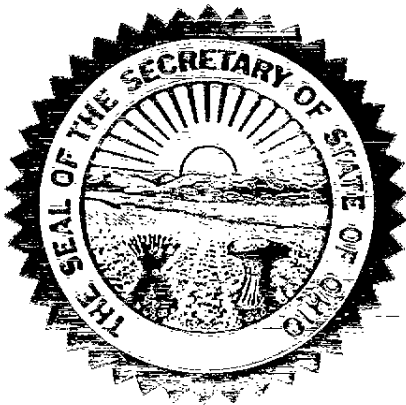
(Signature)

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

**UNITED STATES OF AMERICA,
STATE OF OHIO,
OFFICE OF THE SECRETARY OF STATE.**

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I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show VALMARK INSURANCE AGENCY, LLC, an Ohio Limited Liability Company, Registration No. 1156886, registered to transact business in Ohio on May 17, 2000, and said registration is currently in FULL FORCE AND EFFECT upon the records of this office.



*WITNESS my hand and official seal
at Columbus, Ohio on
July 30, 2001*

J. Kenneth Blackwell

J. Kenneth Blackwell
Secretary of State