710300000/586

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA 03 HAY 16 PM 1: 31

	COMPLIANCE WITH SECTION 608.503, FLORIDA STATU AITED LIABILITY COMPANY TO TRANSACT BUSINESS IN T			MITTED TO R	<i>EGISTER A FO</i> HASSEE, FL	MATON
	Insurance Warehouse, LLC (Name of foreign			1 ALL.A	Maddet, Lt	OMD.
••,	(Name of foreign	limited li	ability company)			
۷ (Georgia Jurisdiction under the law of which foreign limited liability company is organized)	<i>3</i>	(FEI number,	if applicable)	. 117	-
4.	フーソー2003 (Date of Organization)	5	Perpetual			
	(Date of Organization)	(Du	Perpetual ration: Year limited lia exist or "pe	bility company rpetual")	will cease to	
6.						
	(Date first transacted business in Florida. (So			1817.155, F.S.)	•
7.	2880 Johnson Ferry Rd.	Juit.	100			1171 7
	Marietta, GA. 3006Z (Street address		•			
	(Street addres	s of princ	pal office)			
8.	If limited liability company is a manager-manage	d compa	ny, check here 🗹	•		
9.	The name and usual business addresses of the ma	naging n	nembers or manage	rs are as foll	ows:	
			_			06Z
	Brian J. Will 2880 Johnson Brian Tenner 13477 Pros	pact V	ld. Juite 20	o Stran	gs ville, OH	. 44149
10.	Attached is an original certificate of existence, no more than 9 the jurisdiction under the law of which it is organized. (A photranslation of the certificate under oath of the translator must be	otocopy is	not acceptable. If the ce			
11.	Nature of business or purposes to be conducted of	or promo	oted in Florida: 🔼	ccident +	Health Ins	پسسبرو
	Life Insurance					
•	Will	/	*****	**		
	Signature of a member or an a	uthorize	d representative of	a member		
	(In accordance with section 608.408(3),	F.S., the ex	ecution of this document	constitutes		
	an affirmation under the penalties of penal	ŋury that ti 仏:い	e racts stated herein are t	rue.)		
	Typed or printe		of signee	 		-

FILED

CERTIFICATE OF DESIGNATION OF 03 MAY 16 PM 1: 31 REGISTERED AGENT/REGISTERED OFFICE TALLAMY OF STATE TALLAMASSEE, FLORIDA

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.

Insurance Ware	house , Ll	
d the Florida street address	of the registere	d agent and office are:
Corpor	ation Service	Company
	(Name)	
		<u> </u>
		32301
	d the Florida street address Corpor	d the Florida street address of the registered Corporation Service (Name) 1201 Hays Street Florida street address (P.O. Box No.

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.

Patricia Fuell- Authorized Representative

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Secretary of State **Corporations Division** 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CONTROL NUMBER .. 0307655

DATE INC/AUTH/FILED: 02/04/2003 FILED JURISDICTION : GEORGIA

PRINT DATE : 03/12/2003

03 MAY 16 PM 1:31 FORM NUMBER

OF CHAIR OF STATE TALLAHASSEE, FLORIDA

PREMIER FINANCIAL BRIAN S WILL 150 CHICKERING LAKE DR. ROSWELL, GA 30075

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that as of the above print date

MODPERA

INSURANCE WAREHOUSE, LLC GEORGIA LIMITED LIABILITY COMPANY

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Amotated

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date and has not filed articles of dissolution, certificate of tancellation or any other similar document with the Office of the Secretary of Stat

This certificate relates only to the legal existence of the above named entity as of the print date above. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of Statel

issued and certified This information is accordance with the Georgia Electronic Records and Signatures Act and Title 14 of the Official Code of Georgia Annotated and is prima-facic evidence that said entity is in existence or is authorized to transact business in this state.

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Secretary of State