

M03000002117

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

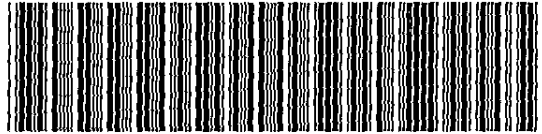
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032
REFERENCE : 144421 4304756
AUTHORIZATION : *Patricia Pizots*
COST LIMIT : \$ 130.00

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03 JUN 27 PM 4:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : June 24, 2003
ORDER TIME : 2:01 PM
ORDER NO. : 144421-030
CUSTOMER NO: 4304756
CUSTOMER: Mr. Robert Porcelli
Bingham Mccutchen LLP
150 Federal Street
Boston, MA 02110

FOREIGN FILINGS

NAME: BACHE INSURANCE AGENCY, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
 PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan - EXT# 1155

EXAMINER: _____

**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 TRANSACTIONS BUSINESS IN THE STATE OF FLORIDA:

1. Bache Insurance Agency, LLC
(Name of foreign limited liability company)
2. Massachusetts
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 11-2294357
(FEI number, if applicable)
4. 6/20/2003
(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. 60 Walnut Street, Wellesley, MA 02181
(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:

Prudential Securities Incorporated

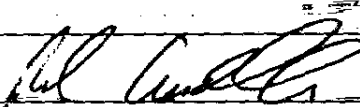
199 Water Street

New York, NY 10292

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


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.)

Paul Waldman, Secretary

Typed or printed name of signee

**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:

Bache Insurance Agency, LLC

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

CT Corporation System

(Name)

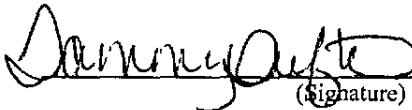
1200 S. Pine Island Road

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

Plantation FL 33324

(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)

TAMMY TOFTEROO
ASSISTANT SECRETARY

\$ 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

BACHE INSURANCE AGENCY, INCORPORATED

60 Walnut Street
Wellesley, MA 02181

June 26, 2003

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TALLAHASSEE, FLORIDA

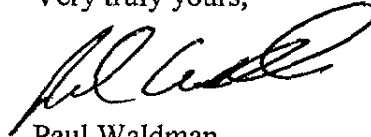
To the Secretary of State

Re: Consent to Use of Name

Dear Sir or Madam:

Bache Insurance Agency, Incorporated hereby gives consent to the use of its name to Bache Insurance Agency, LLC.

Very truly yours,



Paul Waldman
Secretary



William Francis Galvin
Secretary of the
Commonwealth

The Commonwealth of Massachusetts

Secretary of the Commonwealth

State House, Boston, Massachusetts 02138

June 26, 2003

TO WHOM IT MAY CONCERN:

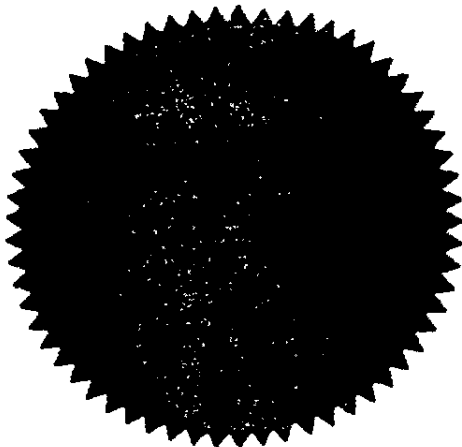
I hereby certify that a certificate of organization of Limited Liability Company was filed in this office by

BACHE INSURANCE AGENCY, LLC

in accordance with the provisions of Massachusetts General Laws Chapter 156C on June 20, 2003.

I further certify that said Limited Liability Company has not filed a certificate of cancellation; and that, so far as appears of record, said Limited Liability Company has legal existence.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.

William Francis Galvin

Secretary of the Commonwealth