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 Summer and Michael Stanley c/o The Compass Insurance Services Group 10644 Geist Ridge Court
Fortville, IN 46040
(City/State/Zip/Phone #)
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SATING SEET FLORIDA

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

V COMPLIANCE WITH NECTION BUXSUS. FIORIDA	STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
IMITED LIABILITY COMPANY TO TRANSACT BUSINE	
North American Compass Insurance S	Services Group, LLC
(Name of	foreign limited liability company)
Texas	3. 11-3702968
(Jurisdiction under the law of which foreign limited company is organized)	iability (FEI number, if applicable)
. 09-04-03	5. Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
09-06-03	
	rida. (See sections 608.501, 608.502, and 817.155, F.S.)
7711 O'Connor Drive, Suite 509	Mailing address News: 10644 Goist Ria
Round Rock, TX 78681	Mailing address please: 10644 Guist Ria Fortville, IN 460
(Stree	t address of principal office)
	me managing members of managers are as follows.
R. Paul Hulsehusch 7711 C	the managing members or managers are as follows: "Connor Drive, Suite 509, Round Rak, TX 7868)
O. Attached is an original certificate of existence, no more the jurisdiction under the law of which it is organized translation of the certificate under oath of the translate	re than 90 days old, duly authenticated by the official having custody of records in (A photocopy is not acceptable. If the certificate is in a foreign language, a primust be submitted.)
O. Attached is an original certificate of existence, no morthe jurisdiction under the law of which it is organized	re than 90 days old, duly authenticated by the official having custody of records in (A photocopy is not acceptable. If the certificate is in a foreign language, a primust be submitted.)

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 Moor Land of 30 STATE OF FLORIDA.

1	The name	of the	Limited	Liability	Company is:
4.	THE HAPPIE	U1 416	L	CROSTILL	COMPANY 12.

North American Compass Insurance Services Group, LLC

2.	The name and	the Florida street	address of the register	red agent and office are
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Business Filings In	corporated
	(Name)
660 E Jefferson St	reet
Florida stree	et address (P.O. Box NOT ACCEPTABLE)
Taliahassee.	الالم
	(City/State/Zin)

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.

\$ 100.00

Filing Fee for Application

Designation of Registered Agent \$ 25.00

5 30.00 Certified Copy (optional)

5.00 Certificate of Status (optional) Corporations Section P.O.Box 13697 Austin, Texas 78711-3697 Geoffrey S. Connor Secretary of State



Office of the Secretary of State

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Organization for North American Compass Insurance Services Group, LLC (filing number: 800242108), a Domestic Limited Liability Company (LLC), was filed in this office on September 04, 2003.

It is further certified that the entity status in Texas is active.



In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on September 22, 2003.



