

M0400000868

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

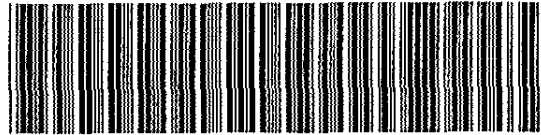
(Business Entity Name)

(Document Number)

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STATE
DEPARTMENT OF REVENUE
TALLAHASSEE, FLORIDA

FILED
04 MAR -4 PM 3:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BK



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032
REFERENCE : 470483 7422668
AUTHORIZATION : *Patricia Pajito*
COST LIMIT : \$ 125.00

04 MAR -4 PM 3:31
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : March 2, 2004
ORDER TIME : 11:04 AM
ORDER NO. : 470483-005
CUSTOMER NO: 7422668
CUSTOMER: Ms. Marcia Belman
The Stanley Laman Group
Suite 295
1235 Westlakes Drive
Berwyn, PA 19312

FOREIGN FILINGS

NAME: STANLEY-LAMAN GROUP
SECURITIES, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward -- EXT# 2935

EXAMINER: _____

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

FILED
MAR 31 2011
OFFICE OF THE
CLERK OF THE
STATE
TALLAHASSEE, FLORIDA

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

1. STANLEY-LAMAN GROUP SECURITIES, LLC
(Name of foreign limited liability company)

2. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 33-1027312
(FEI number, if applicable)

4. 4/1/02
(Date of Organization)

5. Perpetual
(Duration: Year limited liability company will cease to exist or "perpetual")

6. STANLEY LAMAN GROUP SECURITIES, LLC HAS NOT TRANACTED BUS IN FL
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))

7. 1235 Westlakes Dr., Suite 295
Berwyn, PA 19312
(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:

- William G. Stanley, Manager, CEO
- James J. Laman, Manager, CFO
- David C. Eaton, Manager

* STANLEY LAMAN GROUP SECURITIES, LLC 1235 Westlakes Drive, Suite 295
Berwyn, PA 19312

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 provider

X [Signature]

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.)

William G. Stanley
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:

STANLEY LAMAN GROUP SECURITIES, 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..

Carla Lohi **Carla Lohi**
(Signature) **Asst. Vice President**

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

Delaware

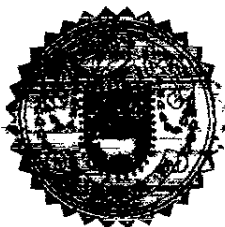
PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "STANLEY-LAMAN GROUP SECURITIES, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRD DAY OF MARCH, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "STANLEY-LAMAN GROUP SECURITIES, LLC" WAS FORMED ON THE FIRST DAY OF APRIL, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

3508651 8300

AUTHENTICATION: 2967357

040163078

DATE: 03-03-04