# MO4000002828

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200038330822

07/07/04--01067--001 \*\*130.00



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 9, 2004

PAMELA WALDORF P.O. BOX 70 WEST PALM BEACH, FL 33402

SUBJECT: WALDORF RISK SOLUTIONS, LLC

Ref. Number: W04000026275

We have received your document for WALDORF RISK SOLUTIONS, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the names and street addresses of the members or managers of the limited liability company.

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) 245-6020.

Tammi Cline Document Specialist

Letter Number: 004A00044141

Division of Comparations D.O. DOV 6297 Tallaharras Elavida 20214

#### TRANSMITTAL LETTER

Registration Section Division of Corporations

TO:

SUBJECT: Waldorf Risk Solutions, LLC		
	of Limited Liability Company)	
	ted Liability Company for Authorization to Track are submitted to register the above referenced or ida	
Please return all correspondence concerning	this matter to the following:	
Pamela J Wald	lorf	
<del></del>	(Name of Person)	
PJ Waldorf, PLC		
	(Firm/Company)	
PO Box 70		
	(Address)	
West Palm Beach, Fl. 3340	·	_
(0	City/State and Zip Code)	
For further information concerning this matt	ter, please call:	
Pamela J Waldorf	at (561 ) 659.9889	
(Name of Person)	(Area Code & Daytime Telephone	Number)
STREET ADDRESS:	MAILING ADDRESS:	<u> </u>
Registration Section	Registration Section	
Division of Corporations 409 E. Gaines Street	Division of Corporations P.O. Box 6327	
Tallahassee, Florida 32399	Tallahassee, Florida 32314	
Enclosed is a check for the following amoun	nt:	
\$130.00 Filing Fee \$130.00 Filing Certif		g Fee, Certificate tatus & Certified Copy

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

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

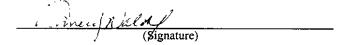
Waldorf Risk Solutions, LLC	
(Name of Foreign Limited	Liability Company)
New York	3. 01-0678164
Jurisdiction under the law of which foreign limited liability company is organized)	( FEI number, if applicable)
January 16, 2002	5. perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
(Date first transacted business in F (See sections 608.501 & 608.502 F.	
30 Prospect Street	
Huntington, NY 11743	
(Street Addres	ss of Principal Office)
PANELA J. WALDORF - 2970 BEAT CO William G. WALDORF - 30 Prospect St	19033 Rd - Wellmoton, Fl. 33414 - MENREN
jurisdiction under the law of which it is organized. (A photoconslation of the certificate under oath of the translator must be su	o days old, duly authenticated by the official having custody of recopy is not acceptable. If the certificate is in a foreign language, a lbmitted.)
. Nature of business or purposes to be conducted	
(In accordance with section 608.408(3),	authorized representative of a member. , F.S., the execution of this document constitutes erjury that the facts stated herein are true.)
tamila J	WHOORE
Typed or printe	ed 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.

The name of the Limited Liability Company is:  Waldorf Risk Solutions, LLC						
2. The name	e and the Florida street address	of the regist	ered agent and office are:			
	PJ Waldorf, PLC C/c	Pameja J (Name)	Walderf			
	224 Datura Street Suite 315 Florida Street Add	dress (P.O. Box	NOT ACCEPTABLE)			
	West Palm Beach	FL City/State				

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, Florida Statutes.



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

### State of New York | ss: Department of State

I hereby certify, that WALDORF RISK SOLUTIONS, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 01/16/2002, and that the Limited Liability Company is subsisting so far as shown by the records of the Department. I further certify the following:

An Affidavit of Publication of WALDORF RISK SOLUTIONS, LLC was filed on 04/11/2002.

An Affidavit of Publication of WALDORF RISK SOLUTIONS, LLC was filed on 04/11/2002.

A Certificate of Amendment was filed on 05/28/2003.

A Biennial Statement was filed 05/26/2004.

I further certify, that no other documents have been filed by such Limited Liability Company.

Witness my hand and the official seal of the Department of State at the City of Albany, this 29th day of June two thousand and four.

Secretary of State

200406300076 118