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TRANSMITTAL LETTER

Division of Corporations
SUBJECT: American Universal Insurance, LLC
(Name of Limited Liability Company)
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Blake Reed
(Name of Person)
Valvano Reed & Aibara, LLC
(Firm/Company)
(i min Company)
One Kalisa Way, Ste 101
(Address)
(Address) AH O O O O O O O O O O O O O
Paramus, NJ 07652
(City/State and Zip Code)
For further information concerning this matter, please call:
in the second se
Blake Reed at (800) 518-7004
(Name of Person) (Area Code & Daytime Telephone Number)
STREET ADDRESS: MAILING ADDRESS:
Registration Section Registration Section
Division of Corporations Division of Corporations
409 E. Gaines Street P.O. Box 6327
Tallahassee, Florida 32399 Tallahassee, Florida 32314
Enclosed is a check for the following amount:
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate Certificate of Status Certified Copy of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 15, 2004

BLAKE REED VALVANO REED & AIBARA, LLC ONE KALISA WAY, STE 101 PARAMUS, NJ 07652

SUBJECT: AMERICAN UNIVERSAL INSURANCE, LLC

Ref. Number: W04000034419

We have received your document for AMERICAN UNIVERSAL INSURANCE, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report/uniform business report fees due this office.)

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6913.

Diane Cushing Document Specialist

Letter Number: 604A00054905



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 28, 2004

BLAKE REED VALVANO REED & AIBARA, LLC ONE KALISA WAY, STE 101 PARAMUS, NJ 07652

SUBJECT: AMERICAN UNIVERSAL INSURANCE, LLC

Ref. Number: W04000034419

We have received your document for AMERICAN UNIVERSAL INSURANCE, LLC and your check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6913.

Letter Number: 504A00056754

Diane Cushing Document Specialist

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: American Universal Insurance, LLC (Name of Foreign Limited Liability Company) New Jersey 34-2000922 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 6/16/04 Perpetual (Duration: Year limited liability company will cease to exist or "perpetual") (Date of Organization) (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) One Kalisa Way, Ste 101 Paramus, NJ 07652 (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: James Valvano, II, One Kalisa Way, Paramus. 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 Sales

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.)

Typed or printed name of signee

James Valvano, II

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.

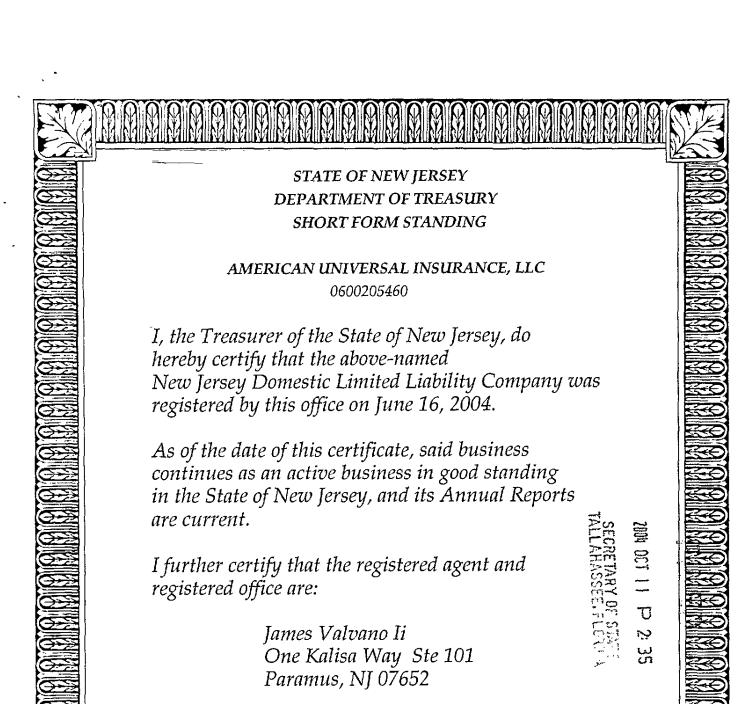
i.	ine name of the	: Limited Liabil	ity Company is:		
	American	Universal	Insurance,	LLC	

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

James Valvano, II					
	(Name)		<u>ਵ</u>	=	
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401 Manualan Con I				8	No. of the
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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)



Continued on next page . . .

