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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Market Intelligence, LLC	<u> </u>	
(Name of Lim	ited Liability Company)	
	ability Company for Authorization to Transact Business abmitted to register the above referenced foreign limited	
Please return all correspondence concerning this m	natter to the following:	
Marjorie Nemzura		
(Nai	me of Person)	
- Fidelity National		
(Fir	m/Company)	
171 N. Clark Street - 8th Floor		
•	(Address)	
Chicago, IL 60601		
(City/Sta	ate and Zip Code)	
For further information concerning this matter, plea	ase call:	
Marjorie Nemzura	at (312223-4552 T	
(Name of Person)	(Area Code & Daytime Telephone Number)	
CTDEET ADDDECC.	े हैं जि	
STREET ADDRESS:	MAILING ADDRESS:	
Registration Section Division of Corporations	Registration Section	
409 E. Gaines Street	Division of Corporations P.O. Box 6327	
Tallahassee, Florida 32399	Tallahassee, Florida 32314	
	rananassee, Florida 32314	
Enclosed is a check for the following amount:		
	☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate Status Certified Copy of Status & Certified C	Сору

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:

Market Intelligend	ce, LLC				
	(Name of Foreign Limi	ited L	iability Company)		
Massachusetts		3	41-1293754		
(Jurisdiction under to company is organized	the law of which foreign limited liabi ed)	lity	(FEI number, if ap	plicable)	
3/19/2004		. 5	perpetual	•	
(Date	e of Organization)	•	(Duration: Year limited liability exist or "perpetual")	company will ce	ase to
upon filing	_	_			
	(Date first transacted business (See sections 608.501 & 608.502	in Flo 2 F.S.	rida, if prior to registration.) to determine penalty liability)		
601 Riverside Av	renue.				
Jacksonville FL 3	32204			255 191 191	2.22
	(Street Add	iress	of Principal Office)		£ /- 1 en
If limited liabil	ity company is a manager-mana	iged	company, check here 🗌	5-2	ڪنسوب ۽ ڇنيج در د آڳ آڻ ڪ
The name and u	usual business addresses of the	mana	nging members or managers ar	e as follows.	iary Gara Garan
	I Information Solutions, Inc., 601 R				
			- 10	,	
				<u> </u>	
	inal certificate of existence, no more tha			•	-
•	he law of which it is organized. (A photo-			n a foreign langu	age, a
nsiation of the certifi	icate under oath of the translator must be	SUDI	nucci.)		
. Nature of busi	iness or purposes to be conduct	ed or	promoted in Florida:		
real estate valuat	tions				-
	Mayoue	Hos	nsur		
	Signature of a member or a (In accordance with section 608.408	in aui 3(3), F.	thorized representative of a me S, the execution of this document const iry that the facts stated herein are true)	ember. citutes	
	Marjorie Nemzura				
	Typed or pr	inted	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:	
Market Intelligence, LLC	

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

	(Name)			
1200 South Pine Island	Road	Za	100	
Florida Stree	t Address (P.O. Box <u>NOT</u> ACCEPTABLE)		- 33G	\$
Plantation	FL 33324		$\dot{\sim}$	
City/State/Zip			U	
			Š	T) _ =2

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.

M-T- Flat with (Signature) M. T. Fitzpatrick, Asst. Secy.

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



Secretary of the Commonwealth

The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02188

November 19, 2004

TO WHOM IT MAY CONCERN:

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

MARKET INTELLIGENCE, LLC

in accordance with the provisions of Massachusetts General Laws Chapter 156C on March 19, 2004.

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation or withdrawal; and that, said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are: **FIDELITY NATIONAL INFORMATION SOLUTIONS, INC.**

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: FIDELITY NATIONAL INFORMATION SOLUTIONS, INC., RICHARD L. COX, TODD C. JOHNSON

The names of all persons authorized to act with respect to real property listed in the most recent filing are: RICHARD L. COX, TODD C. JOHNSON



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth