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Attn: Marsha

please refer and  
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Thank!  
Jennifer

**FOREIGN LIMITED LIABILITY COMPANY**

Fireman's Fund Financial Services, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01 5
Estimated Charge	\$125.00

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Florida Dept of State



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

May 18, 2005

CT CORPORATION

SUBJECT: FIREMAN'S FUND FINANCIAL SERVICES, LLC  
REF: W05000024995

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We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$1050.00.

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Marsha Thomas  
Document Specialist

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Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

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

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

1. Finnan's Fund Financial Services LLC  
(Name of Foreign Limited Liability Company)
2. Delaware  
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 200832888  
(FEI number, if applicable)
4. 01/01/2004  
(Date of Organization)
5. Perpetual  
(Duration: Year limited liability company will cease to exist or "perpetual")
6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 777 San Marin Drive, Novato, CA 94928  
(Street Address of Principal Office)

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TALLAHASSEE, FLORIDA

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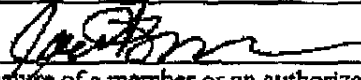
8. If limited liability company is a manager-managed company, check here ☒

9. The name and usual business addresses of the managing members or managers are as follows:

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: \_\_\_\_\_

financial services

  
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.)

Janet S. Kloenhamer

Typed or printed name of signer

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### 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:

Fireman's Fund Financial Services LLC

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

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(Name)

1200 South Pine Island Road

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Plantation

FL 33324

City/State/Zip

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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.*

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By: 

(Signature)

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

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Attachment to Florida  
Member / Manager Information

1.	Full Name: Business Address: City: State: ZIP Code:	Brian J. Gallagher 777 San Marin Drive Novato CA 94998
2.	Full Name: Business Address: City: State: ZIP Code:	Raymond W. Gohhardt 777 San Marin Drive Novato CA 94998
3.	Full Name: Business Address: City: State: ZIP Code:	H. Allan Hull 777 San Marin Drive Novato CA 94998
4.	Full Name: Business Address: City: State: ZIP Code:	Charles M. Kavitsky 777 San Marin Drive Novato CA 94998
5.	Full Name: Business Address: City: State: ZIP Code:	Janet S. Kloenhammer 777 San Marin Drive Novato CA 94998
6.	Full Name: Business Address: City: State: ZIP Code:	Louise Jordan 777 San Marin Drive Novato CA 94998
7.	Full Name: Business Address: City: State: ZIP Code:	Wendy M. Ludwig 777 San Marin Drive Novato CA 94998
8.	Full Name: Business Address: City: State: ZIP Code:	William S. Paukovitz 777 San Marin Drive Novato CA 94998
9.	Full Name: Business Address: City: State: ZIP Code:	Richard J. Rose 777 San Marin Drive Novato CA 94998
10.	Full Name: Business Address: City: State: ZIP Code:	Gary R. Schulze 777 San Marin Drive Novato CA 94998
11.	Full Name: Business Address: City: State: ZIP Code:	Linda E. Wright 777 San Marin Drive Novato CA 94998

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# Delaware

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*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FIREMAN'S FUND FINANCIAL SERVICES, 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 FIFTH DAY OF MAY, A.D. 2005.

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

0706914 8300

050368413



*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3860732

DATE: 05-05-05