(Red	uestor's Name)	
(Add	ress)	
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(City	/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nam	e)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	





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3. DRYMM OCT 2 1 2005

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: J & N Settlement S	(Name of Limited Liability Company)
	ign Limited Liability Company for Authorization to Transact Business in and check are submitted to register the above referenced foreign limited ess in Florida
Please return all correspondence co	ncerning this matter to the following:
Greg Hausmar	ın
	(Name of Person)
Benson Settlem	ent Co.
	(Firm/Company)
1257 North Re	eading Road PL
	(Address)
Stevens, PA	ent Co. (Firm/Company) Pall Bolt 19 PL ST 19 PL 3: 1 17578
	(City/State and Zip Code)
For further information concerning	this matter, please call:
Greg Hausmann	at (_717) 335-3330
(Name of Pe	rson) (Area Code & Daytime Telephone Number)
MAILING ADDRESS:	STREET ADDRESS:
Division of Corporations Division of Corporations	
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the followin ☐ \$125.00 Filing Fee ☐ \$130	ng amount: 0.00 Filing Fee & \$\sum \\$155.00 Filing Fee & \$\sum \\$160.00 Filing Fee, Certificate Certificate of Status

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;

1. J & N Settlement Services, LLC	
(Name of Foreign Limited Liability Company)	
2. New Jersey 3. 20-2391478	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
_{4.} 8/12/05 _{5.} perpetual	
(Date of Organization) (Duration: Year limited liability company will cea exist or "perpetual")	se to
6	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7. One Mall Drive, Suite 210	
Cherry Hill, NJ 08002	5 -11
(Street Address of Principal Office)	
8. If limited liability company is a manager-managed company, check here	LED 19 PM
9. The name and usual business addresses of the managing members or managers are as follows:	ယ္
Benson Settlement Co.	
2 Woodland Road	
Wyomissing, PA 19610	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign langua 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:	
Title Insurance Agency	•
A MA	
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.)	
Carl Benson	

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:
- J & N Settlement Services, LLC
- 2. The name and the Florida street address of the registered agent and office are:

BEBORAH WILLARD

5901 US Highway 19, Ste 11

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

New Port Richey, FL 34652 FL

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, 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)



I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on August 12, 2005.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

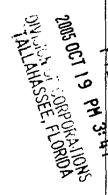
Carl Benson 300 Atrium Way Mt. Laurel, NJ 08054

Continued on next page . . .



STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

J & N SETTLEMENT SERVICES, LLC





IN TESTIMONY WHEREOF, I have

hereunto set my hand and affixed my Official Seal at Trenton, this 8th day of October, 2005

John Greener

John E McCormac, CPA State Treasurer