(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name) MOS – (Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
11/4 FOR LC

Office Use Only

M. HODGES



900060902619

11/04/05--01019--001 **125.00

COVER LETTER

	ion Section of Corporations		
SUBJECT:	TFA National Operation	ns Agency, LLC	
	(Name of Limi	ted Liability Company)	
Florida," Certific		bility Company for Authorization to Transact Business in bmitted to register the above referenced foreign limited	
Please return all	correspondence concerning this m	atter to the following:	
	Ruth Hunte	r Smith, Esq.	
_	(Na	me of Person)	
,	Title First	Agency, Inc.	
_	(Fir	m/Company)	
555 South Front Street, Suite 400			
		(Address)	
	Columb	ous, Ohio 43215	
_	(City/Sta	ate and Zip Code)	
For further infor	mation concerning this matter, ple	ase call:	
Ruth H	lunter Smith	at (614) 583-1422	
	(Name of Person)	(Area Code & Daytime Telephone Number)	
Division P.O. Box	of Corporations 6327 see, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a che ☑ \$125.00	eck for the following amount: Filing Fee	☐\$155.00 Filing Fee & ☐\$160.00 Filing Fee, Certificate Status Certified Copy of Status & 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:

1.	TFA National Operations Agency, LLC (Name of Foreign Limited Liability Company)	
2.	00.0500450	-
4.	September 21, 2005 (Date of Organization) 5. Fifty (50) years (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.	555 South Front Street, Suite 400	- -
	Columbus, Ohio 43215	
	(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:	
	George L. Henry 555 South Front Street, Suite 400, Columbus, Ohio 43215	
the	Of Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of record e jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a anslation of the certificate under oath of the translator must be submitted.)	ds in
	1. Nature of business or purposes to be conducted or promoted in Florida: providing title insurance products and services Signature of the tember of an authorized representative of a member. (In accordance with section 603, 408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	TILL
	George L. Henry	<u> </u>
	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:			
	TFA National Operations Agency, LLC			
2.	2. The name and the Florida street address of the registered agent and office are:			
	CT Corporation Systems			
	(Name)			
	1200 South Pine Island Road			
	Florida Street Address (P.O. Box NOT ACCEPTABLE)			
	Plantation _{FL} 33324			
	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.

CaveRewal Asst Secretary
(Signature)

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

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show TFA NATIONAL OPERATIONS AGENCY, LLC, an Ohio Limited Liability Company, Registration No. 1570767, was organized within the State of Ohio on September 21, 2005, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 13th day of October, A.D. 2005.

Ohio Secretary of State

Validation Number: 200528600190