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Division of Corporations

STATE CORPORATION SYSTEM

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Florida Department of State

Division of Corporations

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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To:

Division of Corporations

Fax Number : (850) 203-0383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (850) 222-1092

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AL

FOREIGN LIMITED LIABILITY COMPANY

CRESTA INSURANCE, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

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Corporate Filing

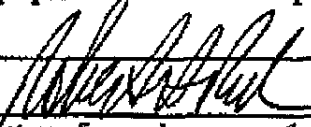
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACT BUSINESS IN FLORIDA****IN COMPLIANCE WITH SECTION 608.501, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:**

1. Cresta Insurance, LLC
(Name of Foreign Limited Liability Company)
2. Colorado
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 20-3722979
(FEI number, if applicable)
4. 10/24/2005
(Date of Organization)
5. Perpetual
(Duration: Your limited liability company will cease to exist or "perpetual")
6. Upon filing
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 9780 Mt. Pyramid Court, Suite 150, Englewood, CO 80112
(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:
Robert Rich, 9780 Mt. Pyramid Court, Suite 150, Englewood, CO 80112
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


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 penalty of perjury that the facts stated herein are true.)

Robert Rich

Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**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:

Cresta Insurance, LLC

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

CT Corporation System

(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.

CT Corporation System

By:

Hiedi M. Liesch

(Signature)

Hiedi Liesch
Assistant Sec

\$ 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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**OFFICE OF THE SECRETARY OF STATE
OF THE STATE OF COLORADO**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**CERTIFICATE**

I, Ginette Dennis, as the Secretary of State of the State of Colorado, hereby certify that,
according to the records of this office,

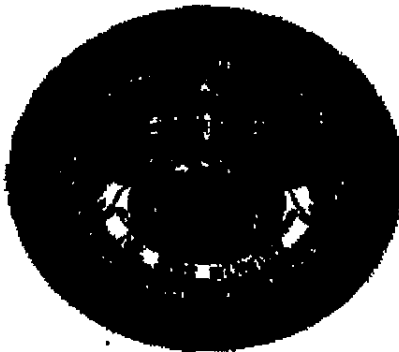
Cresta Insurance, LLC

is a
Limited Liability Company

formed or registered on 10/24/2005 under the law of Colorado, has complied with all applicable
requirements of this office, and is in good standing with this office. This entity has been
assigned entity identification number 20051395604 .

This certificate reflects facts established or disclosed by documents delivered to this office on
paper through 11/21/2005 that have been posted, and by documents delivered to this office
electronically through 11/28/2005 @ 14:32:52 .

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed,
authenticated, issued, delivered and communicated this official certificate at Denver, Colorado
on 11/28/2005 @ 14:32:52 pursuant to and in accordance with applicable law. This certificate is
assigned Confirmation Number 6356308 .



A handwritten signature in cursive script that reads "Ginette Dennis".

Secretary of State of the State of Colorado

*****End of Certificate*****

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, <http://www.sos.state.co.us/Info/CertificateSearch/CertInfo.do>, entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is purely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us/> click Business Center and select "Frequently Asked Questions."