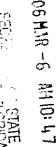
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Mania & Mapier Information Services, LCC (Name of Limited Liability Company)
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the following:
John M. Emmous, Esa. (Name of Person)
Monainy & Nepler Intermetted Services, LCC (Firm/Company)
Monaing Nepier Intermetted Services, LLC (Firm/Company) 500 Corporate Parkway Suite 750 (Address) Ann hasse MY 14226
Am hors -, NY 14226 (City/State and Zip Code)
For further information concerning this matter, please call:
Toka m. Emmons at (716) 862 705/ (Name of Person) (Area Code & Daytime Telephone Number)
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: 125.00 Filing Fee \$\sum \$\sum \$\sum \$\sum \$\sum \text{\$\sum \$\sum \$

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. Maning & Napier Information Services, LLC (Name of Foreign Limited Liability Company)
2. New York 3. 16-147 4416 (Jurisdiction under the law of which foreign limited liability company is organized) (Name of Poteign Eminted Liability Company)
4. 1-31-1995 (Date of Organization) 5. Content of Organization (Duration: Year limited liability company will cease to exist or "perpetual")
6. Tebrucy 2000 (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 500 Corporate Parkeway, Suite 120
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
Manday inapier Associates, LLC 250 Woodcliff IV. FAILPOCT, NY 18450 Estizabeth Liddy 104 Victoria Place, Syracuse, NY 13210 Michael Weiner 693 Summit Drive, bubstor, NY 18580
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: benefits enrollment Software 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.)
Typed or printed name of signee

MAR - 5 AM ID: L

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.

I.	The	name	of the	Limited	Liability	Company	(3)
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2. The name and the Florida street address of the registered agent and office are:

CT Corporation System (Name)

1200 South Piac Island Road
Floridu Stroet Address (P.O. Bux NOT ACCEPTABLE)

Phantation FL 33324

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.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

5.00 Certificate of Status (optional)

State of New York } ss: Department of State

I hereby certify, that MANNING & NAPIER INFORMATION SYSTEMS, L.L.C. a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 01/26/1995, and that the Limited Liability Company is existing so far as shown by the records of the Department.

A Certificate of Amendment MANNING & NAPIER INFORMATION SYSTEMS, L.L.C., changing its name to MANNING & NAPIER INFORMATION SERVICES, L.L.C., was filed 10/06/1995.

> WITNESS my hand and the official seal of the Department of State at the City of Albany, this 07th day of February two NE Ithousand and six.

> > Secretary of State

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