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J. BRYAN JUN 2. 8 2006

COVER LETTER

	stration Section sion of Corporations		
SUBJECT:	Pearl Insurance Group, LLC		
	(Name of Lim	ited Liability Company)	
Florida," Cer	· · · · · · · · · · · · · · · · · · ·	bility Company for Authorization to Transact abmitted to register the above referenced foreign	
Please return	all correspondence concerning this m	natter to the following:	
	Peggy King		O DI
	(Na	me of Person)	NASION OF CORPORATIONS 106 JUN 28 PM 4: 04
	Pearl Insurance Group, LLC		28 CS
	(Fir	m/Company)	PH ST
	1200 E Glen Ave		F: Ot
		(Address)	
	Peoria Heights, IL 61616-5	348	
	(City/Sta	ate and Zip Code)	
For further in	nformation concerning this matter, ple	ase call:	
Peg	gy King	at (309) 679-0796	
	(Name of Person)	(Area Code & Daytime Telephone Numb	er)
Divis P.O. I	LING ADDRESS: ion of Corporations Box 6327 hassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
	check for the following amount: 5.00 Filing Fee \$\times \text{Certificate of}\$	□\$155.00 Filing Fee & □\$160.00 Filing Fee, C Status Certified Copy of Status &	Certificate 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:

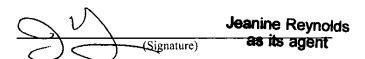
Pearl Insurance Group, LLC		<u></u>		
(Name	of Foreign Limited L	iability Company)	1	
Illinois	3	37-0817309		
Jurisdiction under the law of which fore ompany is organized)	gn limited liability	(1	FEI number, if applicab	le)
3/24/2006	5	Perpetual		
(Date of Organization)		(Duration: Yea exist or "perpe	ar limited liability competual")	any will cease to
(Data first tran	sacted business in Flo	rida if mulan ta maa	viotentian)	
(See sections 60)	3.501 & 608.502 F.S.	to determine pena	lty liability)	06.
1200 E Glen Ave., Peoria Heig	hts, IL 61616-53	48		
				28
· · · · · · · · · · · · · · · · · · ·	(Street Address of	of Principal Office)	
If limited liability company is a n	nanager-managed	company, checl	k here 🗹	06 JUH 28 PH 4: 04
The name and usual business add	resses of the mana	ging members	or managers are as f	
John P Pearl, 1220 E Glen Ave.,	Peoria Heights, IL	61616 Gary P	Pearl, 1220 E Glen	Ave,
Peoria Heights, IL 61616; Greg	gory S Ketay, 223	2 W Warwick [Or., Peoria, IL	
61614; Eugene Retzer, 2528	Hidden Lake Ct	., Peoria, IL 6	1614	
Attached is an original certificate of existe				
jurisdiction under the law of which it is org slation of the certificate under oath of the t			ir the certificate is in a Toi	eign language, a
Nature of business or purposes t	o be conducted or	promoted in Fl	orida: Insurance Sa	ales &
Administration	~~~~	\mathcal{L}		
' (fr	(P)		6-21-	06
(In accordance with		S., the execution of t	entative of a member	
Gary P Pearl	The penanties of perjui	y and the facts state	on herein are true.	
	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:	
Pearl Insura	ince Group, LLC	
2. The name an	nd the Florida street address of the registered agent and office are:	
The	Prentice-Hall Corporation System, Inc.	
	Prentice-Hall Corporation System, Inc. (Name)	三二
	1201 Hays Street P	270
•	Florida Street Address (P.O. Box NOT ACCEPTABLE)	12/12/12
	Tallahassee FL 32301	SEONS LEVEL
	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)

File Number

0180585-1



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

PEARL INSURANCE GROUP, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON MARCH 24, 2006, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE RELATING TO THE FILING OF THE ARTICLES AND PAYMENT, AND IS ORGANIZED TO TRANSACT BUSINESS IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this day of A.D.

Desse White