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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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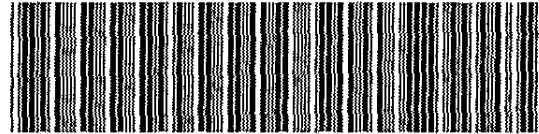
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Senior Benefit Services of Kansas, LLC  
(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:

Jeffrey Bottenberg, Esq.

(Name of Person)

Polsinelli Shalton Welte Suelthaus PC

(Firm/Company)

555 S. Kansas Ave., Suite 301

(Address)

Topeka, KS 66603

(City/State and Zip Code)

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For further information concerning this matter, please call:

Jeffrey Bottenberg, Esq.

(Name of Person)

at ( 785 ) 233-1446

(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

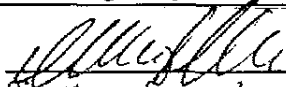
Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy    ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN  
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. Senior Benefit Services of Kansas, LLC  
(Name of Foreign Limited Liability Company)
2. Kansas  
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 48-1205543  
(FEI number, if applicable)
4. 08/29/2006  
(Date of Organization)
5. Perpetual  
(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 S. Kansas Avenue  
Topeka, KS 66603  
(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:  
AmerUS Annuity Group Co., 555 S. Kansas Avenue, Topeka, KS 66603  
\_\_\_\_\_  
\_\_\_\_\_
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: \_\_\_\_\_  
to provide insurance agency services and conduct any and all activities associated therewith.

  
\_\_\_\_\_  
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.)

Michael H. Miller, Secretary  
\_\_\_\_\_  
Typed or printed name of signee

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DIVISION OF CORPORATE & BUSINESS SERVICES

**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:

Senior Benefit Services of Kansas, LLC

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

C T Corporation System

(Name)

1200 S. Pine Island Rd.

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

Plantation

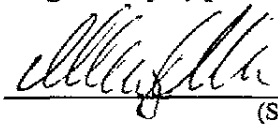
FL 33324

City/State/Zip

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DIVISION OF CORPORATIONS

*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.*

 Michael H. Miller, 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)

**STATE OF KANSAS  
OFFICE OF  
SECRETARY OF STATE  
RON THORNBURGH**

*To all to whom these presents shall come, Greetings:*

I, RON THORNBURGH, Secretary of State of the state of Kansas,  
do hereby certify that, according to the records of this office,

**SENIOR BENEFIT SERVICES OF KANSAS, LLC**

**KANSAS LIMITED LIABILITY COMPANY**

Business Entity ID Number: 3975570

was filed in this office on August 29, 2006 and has complied with the  
applicable provisions of the laws of the State of Kansas and on this date is in  
good standing and authorized to transact business or to conduct its affairs  
within this state.

Dated: 09/14/2006

**For Validation:**

Certificate ID: **52963**

To validate this certificate, visit the following  
web site, enter this certificate ID, then follow  
the instructions displayed.

<https://www.accesskansas.org/businessentity/validate.html>



Signed:

RON THORNBURGH  
SECRETARY OF STATE

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DIVISION  
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**Kansas.gov: The Official Web site of the State of Kansas**



**Kansas Online  
Business Entity Search**

A partnership of the  
**KANSAS SECRETARY of STATE**  
and the **INFORMATION NETWORK**  
of **KANSAS, INC.**

## **Kansas Secretary of State Business Entity Certificate Validation**

**Business Entity  
Search**

**Certificate Valid**

**Helpful Hints**

**Privacy  
Statement**

**Contact Info**

A Certificate of Good Standing was issued by the Kansas Secretary of State bearing Certificate ID **52963** on **September 14, 2006**. This Certificate pertains to the business entity **SENIOR BENEFIT SERVICES OF KANSAS, LLC**, which is a(n) **KANSAS LIMITED LIABILITY COMPANY**. This business has an incorporation date of **August 29, 2006** and is identified by business entity File # **3975570**. The information for this certificate was based on **September 14, 2006**.

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**< Kansas Web**  
**site**

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