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| PICK-UP WAIT MAIL |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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National Development Services, LC

2536 Countryside Boulevard • Suite 300 Clearwater, Florida 33763 (800)700-3211 (727)791-0255

Timothy O. North

President

VIA OVERNIGHT MAIL

April 11, 2007

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: Freedom Direct Advantage, LLC

Gentlemen:

Enclosed is the Cover Letter, Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida, Certificate of Designation of Registered Agent, and our check in the amount of \$160.00 made payable to the Florida Department of State. Also enclosed is a Fed Ex return package for the overnight of the paperwork back to us.

Please let us know if you have any questions. Thank you.

Sincerely,

Marianne Sigona

Assistant to Timothy O. North

Marin Signa

National Development Services, LLC

/ms Encls.

COVER LETTER

TO:

Registration Section

| Division of Corporations | | | |
|--|--|-----------|--------------|
| SUBJECT: FREEDOM DIRECT ADVANTAGE, | LLC | | |
| | ted Liability Company) | | |
| The enclosed "Application by Foreign Limited Lial Florida," Certificate of Existence, and check are suliability company to transact business in Florida | | | |
| Please return all correspondence concerning this m | atter to the following: | | |
| TIMOTHY O. NORTH | | | |
| (Nai | me of Person) | - | |
| NATIONAL DEVELOPMENT SE | RVICES, LLC | | D D |
| (Fire | m/Company) | 07 A | ISIAI 038 |
| 2536 COUNTRYSIDE BLV | O., 6TH FLOOR | APR 13 | |
| (| (Address) | P | |
| CLEARWATER, FL 33763 | | PH 12: 41 | RATION |
| (City/Sta | ate and Zip Code) | | Ø |
| For further information concerning this matter, plea | ase call: | | |
| TIMOTHY O. NORTH (Name of Person) | at (727)726-0726 (Area Code & Daytime Telephone Numl | _ ber) | |
| 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: \$\Bigsim \mathbb{\text{\$\frac{1}{25.00}\$ Filing Fee}} \Bigsim \mathbb{\text{\$\frac{1}{25.00}\$ Filing Fee & Certificate of \$\frac{1}{25.00}\$}\$ | □\$155.00 Filing Fee & □\$160.00 Filing Fee, Status Certified Copy of Status & | | |

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. | FREEDOM DIRECT ADVANTAGE, LLC | | _ |
|-----|--|----------|--------|
| | (Name of Foreign Limited Liability Company) | | |
| 2. | DELAWARE 3. 20-8810214 | | |
| | (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) | | _ |
| 4. | MARCH 29, 2007 5. PERPETUAL | | _ |
| | (Date of Organization) (Duration: Year limited liability company will dexist or "perpetual") | ease to |) |
| 6. | | | |
| | (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) | | _ |
| 7. | 2536 COUNTRYSIDE BLVD., 6TH FLOOR | 07 | SEA |
| | CLEARWATER, FL 33763 | APR I | |
| | (Street Address of Principal Office) | ယ | |
| 8. | If limited liability company is a manager-managed company, check here | PH 12: 4 | RP GRA |
| 9. | The name and usual business addresses of the managing members or managers are as follows: | Ξ | SNOTE |
| | NATIONAL DEVELOPMENT SERVICES, LLC | | |
| | 2536 COUNTRYSIDE BLVD., 6TH FLOOR | | _ |
| | CLEARWATER, FL 33763 | | _ |
| the | Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custo jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign lang inslation 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 SERV | ICES | |
| | 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.) | | _• |
| | TIMOTHY O MORTH | | |

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:

| FREEDOM DIRECT ADVANTAGE, LLO | NTAGE, LLC | ADVAN | DIRECT | FREEDOM |
|-------------------------------|------------|--------------|--------|----------------|
|-------------------------------|------------|--------------|--------|----------------|

| 2. The name and t | he Florida street address of the registered agent and office are: | 07 |
|-------------------|---|---------------------|
| H | HEATHER L. NORTH, ESQ. | APR |
| _ | (Name) | $\overline{\omega}$ |
| 2 | 536 COUNTRYSIDE BLVD., 6TH FLOOR | PH 12: |
| _ | Florida Street Address (P.O. Box NOT ACCEPTABLE) | |
| C | CLEARWATER, FL _{FL} 33763 | |
| | City/State/Zin | |

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)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FREEDOM DIRECT ADVANTAGE, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SECOND DAY OF APRIL, A.D. 2007.

SECRETARY OF STATE DIVISION OF CORPORATIONS



Harriet Smith Windson Secretary of State

AUTHENTICATION: 5557611

DATE: 04-02-07

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