# Division of Capotation 0 10000036 78:351

#### Florida Department of State

Division of Corporations Public Access System

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Integrity Settlement Provider, LLC

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#### H07000599473

#### 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.	Integrity Settlement Provider, LLC (Name of foreign limited liability company)	_	
_			
2. (	Delaware (Jurisdiction under the law of which foreign limited liability company is organized)  3. 87-0770410 (FEI number, if applicable)	-	
4.	4/20/2006  (Date of Organization)  5. Perpetual  (Duration: Year limited liability company will cease to exist or "perpetual")	 •	
6.	Oate first transacted business in Florida. (See sections 603.501, 608.502, and 817.155, F.S.)	)7 IŲL	
7.	One Financial Plaza Suite 1250, Hartford, Connecticut 06103	8	FILE
	SEC.	A	jr U
	(Street address of principal office)	ထု	
8.	If limited liability company is a manager-managed company, check here X	8: 05	٠.
9.	The name and usual business addresses of the managing members or managers are as follows:		
	H. Cayce Awe, One Financial Plaza Suite 1250, Hartford, Connecticut 06103		
	Jain Stamp, Integrity, Systems Technology Park Elettra Avenue, Waterlooville, Hampshire, PO7 7XW United	King	;dom
,	Kris Bezzant, Integrity, Systems Technology Park Elettra Avenue, Waterlooville, Hampshire, PO7 7XW Unite	d Kir	ngdo
3.		₹ . 1. 1. 1. 1.	;
*,		- 3 (V	٠.
10.	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of rethe jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language translation of the certificate under eath of the translator must be submitted.)	ecords e, a	; <b>5</b> 1.
11	. Nature of business or purposes to be conducted or promoted in Florida:	<del>-</del>	
	Life Settlements		
		_	
	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.)		
	H. Cayce Awe, Manager		
	Typed or printed name of signee		

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#### 4670005-99473

### 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:
_Iı	ntegrity Settlement Provider, LLC
2.	The name and the Florida street address of the registered agent and office are:
	Business Filings Incorporated
	(Name)
	1203 Governors Square Blvd, Suite 101
	Florida street address (P.O. Box NOT ACCEPTABLE)
	Tallahassee, FL 32301-2960
	(City/State/Zip)
lid re ste	aving been named as registered agent and to accept service of process for the above stated limited.  Ibility company at the place designated in this certificate, I hereby accept the appointment as gistered agent and agree to act in this capacity. I further agree to comply with the provisions of all attutes 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, F.S.
	Terese Coulthard, Asst Secretary, Business Filings Incorporate (Signature)
	\$ 100.00 Filing Fee for Application
	\$ 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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## Delaware

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#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "INTEGRITY SETTLEMENT PROVIDER, 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 THIRTIETH DAY OF MAY, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

4145571 8300 070641262 Warriet Smith Window Secretary of State

AUTHENTICATION: 5714662

DATE: 05-30-07