

MO7000006581

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

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Certificates of Status _____

Special Instructions to Filing Officer:

W07-50415

Office Use Only



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2007 NOV -5 P 5:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 11, 2007

STEVE RECK
INDEPENDENT ADMINISTRATIVE SERVICES
2536 COUNTRYSIDE BLVD. 6TH FL
CLEARWATER, FL 33763

SUBJECT: INSURANCE SERVICES ADMINISTRATION COMPANY, LLC
Ref. Number: W07000050415

We have received your document for INSURANCE SERVICES ADMINISTRATION COMPANY, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 107A00059870

2007 OCT 11 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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INSURANCE SERVICES ADMINISTRATION COMPANY, LLC

October 18, 2007

Agnes Lunt, Regulatory Specialist II
FL Dept of State, Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee FL 32301

Subject: Insurance Services Administration Company, LLC
Ref. Number: W07000050415

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dear Agnes,

Per a conversation that you had with Steve Reck on October 17, 2007, here is the response to letter number 107A00059870 received by you. Our corporation is the owner of both Insurance Services Administration Company, Inc and Insurance Services Administration Company, LLC. As such, there should be no conflict between the two names.

If you have any questions, please contact me at 727-726-0726.

Sincerely,

Brandy Sackel

Brandy Sackel

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Insurance Services Administration Company, 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:

Steve Reck

(Name of Person)

Independent Administrative Services

(Firm/Company)

2536 Countryside Blvd, 6th Fl

(Address)

Clearwater FL 33763

(City/State and Zip Code)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Steve Reck

(Name of Person)

at (727) 726-0726

(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. Insurance Services Administration Company, LLC
(Name of Foreign Limited Liability Company)
2. Delaware 3. 26-1194020
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. 9-13-2007 5. Perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. 9-13-2007
(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
Clearwater FL 33763
(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:

Timothy O. North
2536 Countryside Blvd, 6th Floor
Clearwater FL 33763

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: Insurance Marketing

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. North
Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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:

INSURANCE SERVICES ADMINISTRATION COMPANY, LLC

If name unavailable, the alternate name to be used in the state of Florida is:

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

HEATHER NORTH

(Name)

2536 COUNTRYSIDE BLVD 6TH FL

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

CLEARWATER, FL 33763

FL

City/State/Zip

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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 "INSURANCE SERVICES ADMINISTRATION COMPANY, 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 FOURTEENTH DAY OF SEPTEMBER, A.D. 2007.



4423280 8300

071014372

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6000042

DATE: 09-14-07