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(Requestor's Name)

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08 JUN 20 PM 2:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. HAMPTON

JUN 23 2008

EXAMINER

05986-2008

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Unisource Program Administrators, 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:

Debbie Self

(Name of Person)

Clalmetrics

(Firm/Company)

9701 North Boardwalk Blvd.

(Address)

Oklahoma City, Oklahoma 73162

(City/State and Zip Code)

For further information concerning this matter, please call:

Debbie Self

(Name of Person)

at (405) 641-9447

(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



www.lawokc.com

Please respond to the Oklahoma City office

*Sender's email:
debbie.self@lawokc.com*

June 19, 2008

Florida Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Supplemental filing for Unisource Program Administrators, LLC

Dear Sir or Madam:

Enclosed please find an amended application for foreign qualification for Unisource Program Administrators, LLC.

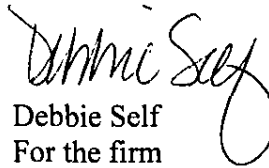
Our previous filing was rejected with a request for following items:

1. List of managers and members;
2. Document needs to be signed by a manager; and
3. Certificate of Good Standing.

Enclosed are the items necessary to finalize this filing. Please note that the Certificate of Good Standing is an original certified copy from the Oklahoma Secretary of State. Oklahoma certificates are provided by the Secretary of State electronically. They are not sealed or imprinted, so although they are similar in appearance to a photocopy, they are actually certified documents.

Should you have any questions or require further information, please contact me at 405-232-2800. Thank you for your attention to this matter, and I look forward to your reply.

Sincerely,


Debbie Self
For the firm

Enclosures (as stated)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

08 JUN 20 PM 12:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

June 13, 2008

DEBBIE SELF
CLAMETRICS
9701 N BOARDWALK BLVD
OKLAHOMA CITY, OK 73162

SUBJECT: UNISOURCE PROGRAM ADMINISTRATORS, LLC
Ref. Number: W08000028850

We have received your document for UNISOURCE PROGRAM ADMINISTRATORS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper, that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 008A00036361

**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. Unisource Program Administrators, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")

2. Oklahoma 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. April 24, 2008 5. Perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. Upon Certification
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 9701 Boardwalk Blvd., Oklahoma City, Oklahoma 73162
(Street Address of Principal Office)

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TALLAHASSEE, FLORIDA

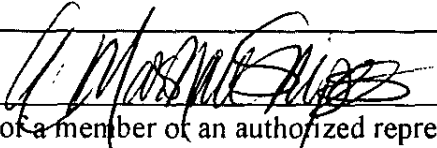
8. If limited liability company is a manager-managed company, check here ☐

9. The name and usual business addresses of the managing members or managers are as follows:

See Attached

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: See Attached


Signature of a member of 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.)

A. Marshall Snipes

Typed or printed name of signee

PURPOSE CLAUSE

The nature of the business and the purpose of the company shall be to act as agent, adjuster and third party administrator for insurance companies and employers in the service of accident and health, property, casualty, workers' compensation, surety, fire, marine, vehicle and any and all other lines of insurance; to apply for, acquire, and hold all licenses, permits, and franchises necessary or useful in the pursuit of said purposes and to engage in all activities reasonably necessary in and incidental to the furtherance of its said purposes not otherwise prohibited by law.

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TALLAHASSEE, FLORIDA

UNISOURCE PROGRAM ADMINISTRATORS, LLC

An Oklahoma Limited Liability Company

Date of Formation: April 24, 2008

State of Domicile: Oklahoma

Effective as of: May 1, 2008

MEMBERS:

Buckhorn Partners, LLC
9701 N. Boardwalk Blvd.
Oklahoma City, OK 73162

UAI Holdings, LLC
6010 Cattleridge Drive
Suite 100
Sarasota, FL 34232

MANAGERS AND BUSINESS ADDRESSES:

A. Marshall Snipes
9701 N. Boardwalk Blvd.
Oklahoma City, OK 73162

Thomas N. Richards
9701 N. Boardwalk Blvd.
Oklahoma City, OK 73162

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TALLAHASSEE, FLORIDA

Robert L. Barcum
9701 N. Boardwalk Blvd.
Oklahoma City, OK 73162

James N. McConnaughay
6010 Cattleridge Drive
Suite 100
Sarasota, FL 34232

Andrew W. Olwert, III
6010 Cattleridge Drive
Suite 100
Sarasota, FL 34232

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**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:

Unisource Program Administrators, LLC

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

C T Corporation System

(Name)

1200 South Pine Island Road

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

Plantation, Florida 33324

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.

C T Corporation System

By: 

(Signature)

J.L. Miles, Asst. Secy.

\$ 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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OFFICE OF THE SECRETARY OF STATE



**CERTIFICATE OF GOOD STANDING
DOMESTIC LIMITED LIABILITY COMPANY**

I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.

I FURTHER CERTIFY that UNISOURCE PROGRAM ADMINISTRATORS, LLC whose registered agent is MARSHALL SNIPES, with its registered office at 9701 N BOARDWALK BLVD OKLAHOMA CITY 73162 USA Oklahoma is a Domestic Limited Liability Company duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.



IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this 19th, day of June, 2008.

M. Susan Savage

Secretary Of State