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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

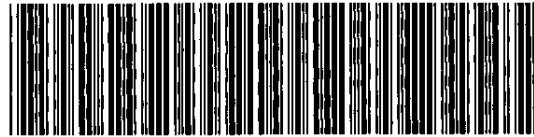
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
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B. Tadlock SEP 16 2008

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

September 2, 2008

Attention: Brenda Tadlock

Dear Ms. Tadlock,

I am writing to request the dissolution of my Florida LLC by the name of KESTREL ASSURANCE, LLC. I assure you that I will not revoke the dissolution. I would also like to assign the name of KESTREL ASSURANCE, LLC to myself Todd Disner.

If I can be of further assistance in this matter please do not hesitate to contact me.

Sincerely,

A handwritten signature in black ink, appearing to read "Todd Disner", with a long horizontal line extending to the right.

Todd Disner
1825 Ponce de Leon Blvd. #321
Coral Gables, FL 33134

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KESTREL ASSURANCE, 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:

Janine Anton
(Name of Person)

Asset Protection
(Firm/Company)

1704-B LLano Street, #128
(Address)

Santa Fe, NM 87505
(City/State and Zip Code)

For further information concerning this matter, please call:

Janine Anton at (505) ³¹⁶ 361-3902
(Name of Person) (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. **KESTREL ASSURANCE, 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. **New Mexico**

(Jurisdiction under the law of which foreign limited liability company is organized)

3.

(FEI number, if applicable)

4. **July, 7 2008**

(Date of Organization)

5. **Perpetual**

(Duration: Year limited liability company will cease to exist or "perpetual")

6. **n/a**

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

7. **1825 Ponce de Leon Blvd. #321**

Coral Gables, FL 33134

(Street Address of Principal Office)

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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:

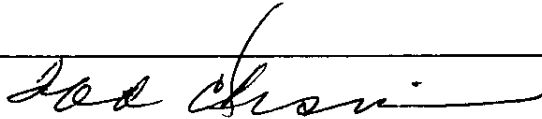
Todd Disner

1825 Ponce de Leon Blvd. #321

Coral Gables, FL 33134

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: **Advertisement consultation**



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.)

Todd Disner

Typed or printed name of signer

**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:

KESTREL ASSURANCE, 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:

Todd Disner

(Name)

1825 Ponce de Leon Blvd. #321

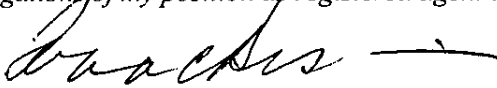
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Coral Gables, FL 33134

FL

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.



(Signature)

\$ 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
DIVISION OF CORPORATIONS



OFFICE OF THE
PUBLIC REGULATION COMMISSION

CERTIFICATE OF GOOD STANDING AND COMPLIANCE

IT IS HEREBY CERTIFIED that:
KESTREL ASSURANCE, LLC

4058178

an organization organized under the laws of
NEW MEXICO

is duly authorized to transact business in New Mexico, as a
Domestic Organization, under the

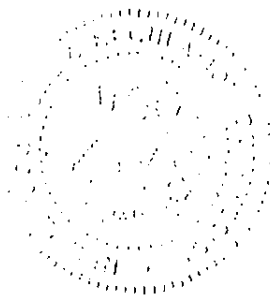
LIMITED LIABILITY COMPANY ACT

(53-19-1 TO 53-19-74 NMSA 1978)

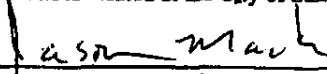
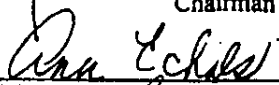
having filed its Articles of Organization JULY 7, 2008
and Certificate of Organization issued as of said date.

IT IS FURTHER CERTIFIED that fees due the Public Regulation
Commission, which have been assessed against the aforesaid
organization, have been paid to date and aforesaid organi-
zation is in good standing and duly authorized to transact
business as existence has not been revoked in New Mexico
This Certificate is not to be construed as an endorsement,
recommendation or notice of approval of the organization's
financial condition or business activities and practices.
This Certificate of Good Standing and Compliance expires
when existence ceases as provided by law.

Dated: SEPTEMBER 15, 2008



In testimony whereof, the Public Regulation of the
State of New Mexico has caused this certificate to be
signed by its Chairman and the seal of said
Commission to be affixed at the City of Santa Fe.


Chairman

Bureau Chief