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(City/State/Zip/Phone #)

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09 JAN 12 AM 10:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES

JAN 14 2009

EXAMINER



Insurance Licensing Services

111 N. Railroad Street
Groesbeck, TX 76642

#680
Date January 7, 2009

Region 813 Initials jrs

To: Florida Secretary of State

Division of Corporations

2661 Executive Center Circle

Tallahassee FL 32301

Dear Sir/Madam:

This transmittal is for filing the following document(s) on behalf of AgentInsure, LLC



Application for Certificate of Authority



Enclosed are:



Submission Cover Sheet



Check for \$ 125.00 #95059



Application form(s)



Certificate of Good Standing



Articles of Incorporation

Please return all filed copied document(s) etc to:

Insurance Licensing Services of America, Inc

111 N. Railroad
Groesbeck, TX 76642

For any questions regarding this submittal, please contact :

Jack Slapper (254) 729-6240

Telephone

(254) 729-8069

Fax

jslapper@licensing4insurance.com

E-Mail

813/FL/jrs

COVER LETTER

263541658

TO: Registration Section
Division of Corporations

SUBJECT: AgentInsure, 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:

Jack Slapper
(Name of Person)

ILSA
(Firm/Company)

111 N. Railroad St.
(Address)

Groesbeck, TX 76642
(City/State and Zip Code)

For further information concerning this matter, please call:

Traci Houston at (254) 729-6240
(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

10/13/00 10:05 AM
6

**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. AgentInsure, LLC
(Name of Foreign Limited Liability Company)
2. TX
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 263541658
(FEI number, if applicable)
4. 10/14/2008
(Date of Organization)
5. Perpetual
(Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon Qualification
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. _____
601 Silveron Blvd., Suite 170 Flower Mound TX 75028
(Street Address of Principal Office)

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

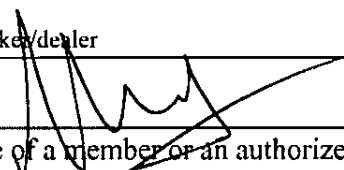
9. The name and usual business addresses of the managing members or managers are as follows:

<u>Nag Rao</u>	<u>601 Silveron Blvd.</u>	<u>Flower Mound</u>	<u>TX</u>	<u>75028</u>
<u>Damien Spillers</u>	<u>601 Silveron Blvd.</u>	<u>Flower Mound</u>	<u>TX</u>	<u>75028</u>

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: _____

Non-Resident Full Service broker/dealer


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.)

Nag Rao

Typed or printed name of signee

RECEIVED
JAN 13 2009

**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:

AgentInsure, LLC

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

Corporation Service Company

(Name)

1201 Hays Street

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

Tallahassee

FL 32301

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.

Corporation Service Company

By:

William M. Edrington
(Signature)

William M. Edrington

Authorized Representative

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

FILED
09 JAN 12 AM 10:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697



Hope Andrade
Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for AgentInsure, LLC (file number 801040525), a Domestic Limited Liability Company (LLC), was filed in this office on October 14, 2008.

It is further certified that the entity status in Texas is in existence.

FILED
09 JAN 12 AM 10 46
SECRETARY OF STATE
ALEXANDER L. BORDO

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on December 29, 2008.



A handwritten signature in black ink, appearing to read "Hope Andrade".

Hope Andrade
Secretary of State