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(Requestor's Name)

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(City/State/Zip/Phone #)

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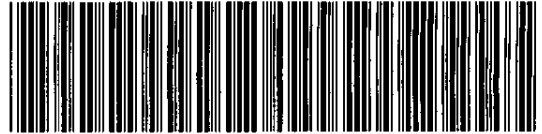
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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M. THOMAS

JAN 15 2009

EXAMINER

Fortace LLC
515 S. Flower St., 36th Floor
Los Angeles, CA 90071

State of Florida
FL Reg Section Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

RE: **Fortace LLC**

To Whom It May Concern:

Enclosed you will find our completed application.

Please mail all correspondence to:

Frank Sillman
Fortace LLC
515 S. Flower St., 36th Floor
Los Angeles, CA 90071

If you have any questions regarding this application, please contact:

Frank Sillman
Fortace LLC
Phone: (213) 236-3700
Fax: (213) 536-4294
Email: fsillman@fortace.com

Enclosures

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Fortace 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:

Frank Sillman
(Name of Person)

Fortace LLC
(Firm/Company)

515 S. Flower St., 36th Floor
(Address)

Los Angeles, CA 90071
(City/State and Zip Code)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Frank Sillman at (213) 236-3700
(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. Fortace 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. California 3. 80-0279693
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 09/29/2008 5. Perpetual
(Date of Organization) (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. 515 S. Flower St., 36th Floor, Los Angeles, CA 90071
(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:

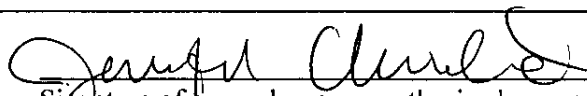
Richard H Wohl, 515 S. Flower St., 36th Floor, Los Angeles, CA 90071

Frank M Sillman, 515 S. Flower St., 36th Floor, Los Angeles, CA 90071

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: _____

Debt Collection

 Attorney In fact

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.)

Jennifer Cleveland, Pursuant to Power of Attorney

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:

Fortace 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:

C T Corporation System

(Name)

1200 South Pine Island Road

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

Plantation

FL 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:

Jeanne Nelson
(Signature)

Jeanne Nelson
Assistant Secretary

\$ 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

State of California
Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: FORTACE LLC

FILE NUMBER: 200827410019
FORMATION DATE: 09/29/2008
TYPE: DOMESTIC LIMITED LIABILITY COMPANY
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of January 3, 2009.

Debra Bowen

DEBRA BOWEN
Secretary of State

SEK


Collectors Insurance Agency, Inc.
Power of Attorney

NOTICE IS HEREBY GIVEN THAT Fortace LLC, ("Entity") an entity organized under the laws of California, does hereby appoint Catherine Ramstad, Jennifer Cleveland, Robin Buendiger, Janis St. Martin and Joleen Schwartz while employed by Collectors Insurance Agency, Inc. as attorney-in-fact for the entity to act for the entity and affiliates and subsidiaries of the entity attached hereto as Exhibit A, specifically organized herein by reference ("the Subsidiaries") in the Entities' and Subsidiaries' names for the limited purposes authorized herein.

The Entity and Subsidiaries, having taken all necessary steps to authorize the changes, hereby grants it's attorney-in-fact the power to execute the documents necessary to file qualifications, certificates of authority, registrations, business registrations, licenses, permits and forms of similar import on behalf of the Entity and Subsidiaries in any state, jurisdiction, the District of Columbia and Puerto Rico.

This Power of Attorney expires when revoked by the Entity or Affiliates or Subsidiaries.

IN WITNESS WHEREOF, the undersigned have executed this Power of Attorney on the 2 day of December, 2008.



Signature of Authorized Entity Representative

Richard Wohl, Managing-Member

Print Name and Title

Sworn to and subscribed before me
this 4th of Dec., 2008.

Notary Public, State of California
Commission Expires: 7/28/09
