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M. THOMAS

MAR - 4 2009

EXAMINES



Central Licensing Bureau, Inc.
1501 NORTH UNIVERSITY
SUITE 550

1501 NORTH UNIVERSITY
SUITE 550
LITTLE ROCK, ARKANSAS 72207-5271
www.centrallicensingbureau.com
(501) 654-8044
FAX - (501) 664-6182

GENA BRADSHAW, FLMI Chief Executive Officer

W.H.L. WOODYARD IV Chief Operating/Financial Officer

February 24, 2009

Florida Dept. of State Division of Corporations 2661 Executive Center Cr. W Tallahassee, FL 32301

Dear Sir/Madam:

Enclosed, please find the necessary documents to qualify EASTERN INSURANCE ACQUISTION AGENCY, LLC. to do business in your state.

I trust this letter and the enclosed documents place them in compliance with your state Statutes. However, if any further action is required, please do not hesitate to contact me.

Thank you for your consideration of this filing.

Sincerely,

Patricia Torres

Corporate Qualification Division

/pt

Enclosures

SECRETARY OF STATE TALLAHIASSEE, FLORIDA

FILE

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: Eastern Insurance Acquisition Agency,	LLC		
	nited Liability Company)		
The enclosed "Application by Foreign Limited Lia Florida," Certificate of Existence, and check are s liability company to transact business in Florida			
Please return all correspondence concerning this n	natter to the following:		
Brian Corbett			
(Na	ame of Person)		
Eastern Insurance Acquisition Agency LL0	0		
(Firm/Company) ≥ S			
		SECRETAR ALLAHASSI	5
613 Baitimore Dr			
	(Address)	고유 클	
		STA STA	≅ } * ***
Wilkes-Barre, Pennsylvania 1870	2		5 ′
(City/Si	tate and Zip Code)		
For further information concerning this matter, ple	ease call:		
Brian Corbett	at (570) 8192000		
(Name of Person)	(Area Code & Daytime Telephone N	(umber)	
MAILING ADDRESS:	STREET ADDRESS:		
Division of Corporations	Division of Corporations		
P.O. Box 6327	Clifton Building		
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301		
Enclosed is a check for the following amount: \$\sum{125.00 Filing Fee}\$ \sum{130.00 Filing Fee & Certificate of the following amount:}	\$155.00 Filing Fee & \$160.00 Filing	Fee, Certific	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Eastern Insurance Acquisition Agency, LLC	clude "Limited Liability Company," "L.L.C.," or "LLC.")
(Name of Poteign Emined Elability Company, must me	nude Elimited Elability Company, E.E.C., of EEC. j
(If name unavailable, enter alternate name adopted for the purp consent of the managers or managing members adopting the al Company," "L.L.C.," "LLC.")	pose of transacting business in Florida and attach a copy of the writte lternate name. The alternate name must include "Limited Liability
2. Pennsylvania	3. 26-4037068
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. 1-7-09	5. Perpetual
4. 1-11-09 (Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6.	
(Date first transacted business in F (See sections 608.501 & 608.502 F.	S. to determine penalty liability)
7. 613 Baltimore Drive	SEC TALL
Wilkes-Barre, Pennsylvania 18702	09 MAR -3 SECRETARY FILL MASSE
	ss of Principal Office) Fri Tri
8. If limited liability company is a manager-manage	
9. The name and usual business addresses of the ma	anaging members or managers are as follows:
Brian Corbett, 613 Baltimore Dr., Wilkes-Barre, PA	18702
Paul Siegel, 613 Baltimore Dr, Wilkes Barre, PA 187	702
Robert Gill, 613 Baltimore Dr., Wilkes-Barre, PA 18	702
10. Attached is an original cartificate of a datases as more than 0	0 days old, duly authenticated by the official having custody of records in
the jurisdiction under the law of which it is organized. (A photox	
translation of the certificate under oath of the translator must be su	bmitted.)
11. Nature of business or purposes to be conducted	or promoted in Florida: The business of insurance,
functioning as ins. agenc	<i>1</i>
· J. / Sold	
	authorized representative of a member.
	F.S., the execution of this document constitutes erjury that the facts stated herein are true.)
Brian Corbett	

Typed or printed name of signee

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	f the Limited Liability Compa	my is:			
Eastern Insurance	Acquisition Agency LLC				
If name unavail	lable, the alternate name to be	used in the state	of Florida is:		
2. The name an	nd the Florida street address o	f the registered a	gent and office are:	SECR	09 MAR
C T Corporation System				ASSA ASSA	3-3
	(Name)				
1200 South Pine Island Road					A
Florida Street Address (P.O. Box NOT ACCEPTABLE)					ďΦ
	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.

By: Attleen Macin

(Signature)

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

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

FEBRUARY 12, 2009

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

EASTERN INSURANCE ACQUISITION AGENCY, LLC

is duly organized as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

Certification Number: 7886120-1 Verify this certificate online at http://www.corporations.state.pa.us/corp/soskb/verify.asp