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To:

Division of Corporations

: (850)617-6383

From:

Account Name

: CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053

Phone

: (561)694-8107

Fax Number

: (561)694-1639

## FLORIDA/FOREIGN LIMITED LIABILITY CO.



Southeast Series of Lockton Companies, LLC

Certificate of Status	1
Certified Copy	0
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Estimated Charge	\$130.00

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Corporate Filing Menu

AUG -4 2009

**EXAMINER** 

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

IN COMPUTANCE WITH SECTION OR SOLETIONS STATISTICS THE POLICYING IS SUBMITTED TO REGISTER A FOREIGN

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. Southeast Series of Lockton Companies, 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 writte consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")
2. Illinois 3. 20-5845972
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4. November 28, 2006  (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. 444 West 47th Street, Suite 900 字形 등
Kansas City, MO 64112
(Stress Address of Principal Office)
8. If limited liability company is a manager-managed company, check here
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:
Lockton Management, LLC, 444 West 47th Street, Suite 900, Kansas City, MO 64112
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records it 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 each of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: To provide retail
insurance intermediary and risk management consulting services
Montplushing
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.)
Lockton Management, LLC, Manager, By: Lockton Insurance Agency, Inc., Member,
by William W. Homphrey III. Executive Vice President and Socretary  Typed or printed name of signee

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# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 of 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 Comp	eany is:	
Southeast Series of Lockton Compan	ies, LLC	···
If name unavailable, the alternate name to b	e used in the state of Florida is:	SEC IE
2. The name and the Florida street address	of the registered agent and office are:	NG -3
Corporate Creations No	etwork, Inc.	FO B
	(Name)	8: 40 STATE
11380 Prosperity Farm	s Road #221E	高 5
Florida Street Add	Iresa (P.O. Box NOT ACCEPTABLE)	
Palm Beach	FL 33410	
	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.

Corporate Creations Network, Inc.

BY: (Signature) Samantha Simons, Special 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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File Number

0196205-1



### To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, a hereby certify that

LOCKTON COMPANIES, LLC. HAVING ORGANIZED IN THE STATE OF ILLINOIS ON SEPTEMBER 08, 2006, AND HAVING ESTABLISHED A SERIES WITH THE DESIGNATED NAME OF SOUTHEAST SERIES OF LOCKTON COMPANIES, LLC ON NOVEMBER 28, 2006, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



Authentication #: 0921501700

Authoriticate at: http://www.cyberdriveillingis.com

In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 3RD

day of AUGUST

A.D.

2009

Desse White

SECRETARY OF STATE