# M0900005043

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S. HAWKES

DECRESSES

EXAMINER





December 9, 2009

JOANNE SPRUILL PO BOX 1449 600 KING STREET WILMINGTON, DE 19899

SUBJECT: GBN, LLC

Ref. Number: W09000053668

We have received your document for GBN, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a foreign limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations. Therefore, the limited liability company must select an alternate name for use in the state of Florida. Also, please note that adding "of Florida" or "Florida" to the end of the name is not acceptable.

Please insert the alternate name in the space provided on the application form. You must also attach a copy of the written consent of the managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

The alternate name must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited"may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable limited liability company suffixes in Florida: "Limited Company," "L.C.," and "LC."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Suzanne Hawkes Regulatory Specialist II

Letter Number: 609A00037632

December 14, 2009

**Division of Corporations** Registration Section P.O. Box 6327 Tallahassee, FL 32314

Re: Foreign Limited Liability Company Registration

Subject: GBN, LLC

Ref. Number W09000052388

To Whom It May Concern:

Attached is the application to register GBN LLC as a Foreign Limited Liability Company in your state. We are registering under the alternate name, Global Benefits Network, LLC.

GBN LLC is a Delaware-domiciled LLC formed October 30, 2009.

A check for the filing fee in the amount of \$125.00 has already been received and processed by your office.

If you have any questions or need any additional information, please do not hesitate to contact me.

Respectfully,

Joanne Spruit

Paralegal II

Delaware American Life Insurance Company

P.O. Box 1449

600 King Street

Wilmington, DE 19899

Ph. 302-594-2640

E-mail: joanne.spruill@alico.com

#### 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. Name of Fore	GE	BN, L	LC. "Limited Liability Company," "L.L.C.," or	"IIC"\
(Name of Fore	Global Bene			LLC. )
	enter alternate name adopted for the press or managing members adopting the	urpose	of transacting business in Florida and attach te name. The alternate name must include "	
2. (Jurisdiction under company is organiz	Delaware the law of which foreign limited liabil ted)	lity 3.	27-1206753 (FEI number, if applicable)	C23 P
4(Dat	10/30/2009 e of Organization)	5.	Perpetual  (Duration: Year limited liability company exist or "perpetual")	will coase to
6. Upon registra				3
	(Date first transacted business in (See sections 608.501 & 608.502	n Florio ? F.S. to	la, if prior to registration.) determine penalty liability)	
7. 600 King Stre	·			
Wilmington, E	DE 19801			
	(Street Add	lress of	Principal Office)	**************************************
8. If limited liabil	ity company is a manager-mana	ged co	empany, check here	
9. The name and t	usual business addresses of the r	manag	ing members or managers are as follo	ows:
Delaware Am	nerican Insurance Company			
600 King Stre	eet			
Wilmington, I	DE 19801			
the jurisdiction under the		ocopy is	s old, duly authenticated by the official having mot acceptable. If the certificate is in a foreign ed.)	
11. Nature of busi	ness or purposes to be conducte	ed or p	romoted in Florida: Pooling service	e company
<del></del>		(3), F.S.,	prized representative of a member. the execution of this document constitutes that the facts stated herein are true.)	·
			D. Walma	
	Typed or prin	nted na	ame of signee	

## WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or Managing
Members of GBN, UCC (Name of Limited Liability Company)
a limited liability company duly organized and existing under the laws of
Oelaware (State or Country of Organization)
Because the name of this foreign limited liability company does not satisfy the
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the
following name to transact business in the state of Florida:
Clobal Benefits Wetwork, LLC (Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.)
Date: 12/14/2009
Signature(s) of Manager(s) and/or Managing Member(s):

# Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT

COPY OF THE CERTIFICATE OF FORMATION OF "GBN, LLC", FILED IN

THIS OFFICE ON THE TWENTIETH DAY OF OCTOBER, A.D. 2009, AT 1:06

O'CLOCK P.M.



4734225 8100

090978334

AUTHE

Jeffrey W. Bullock, Secretary of State

AUTHENTICATION: 7615237

DATE: 10-30-09

You may verify this certificate online at corp.delaware.gov/authver.shtml

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

FLORIDA.  1. The name of the Limited Liability Company is:	DEC 23 PH P: 112
	S 15
GBN, LLC	2 %
If unavailable, the alternate to be used in the state of Florida is:	* · · · · · · · · · · · · · · · · · · ·
2. The name and the Florida street address of the registered agent and office are:	
Corporation Service Company (Name)	
(Hans)	
1201 Hays Street	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Talahasee, 种以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 register 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	red .

\$ 100.00 Filing Fee for Application

(Signature)

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)