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SUFFICIENCY OF FILING

DEPARTMENT OF STATE OF STATE CONVISION OF CORPORATION OF CORPORATION

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EXAMINER



CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 222-1173 FILING COVER SHEET ACCT. #FCA-14 **CONTACT:** Kim Weidenbach DATE: 09/22/10 **REF. #:** 000466.132435 CORP. NAME: FLOOD RISK SOLUTIONS, LLC () ARTICLES OF INCORPORATION () ARTICLES OF AMENDMENT () ARTICLES OF DISSOLUTION () ANNUAL REPORT () TRADEMARK/SERVICE MARK () FICTITIOUS NAME (XX) FOREIGN QUALIFICATION () LIMITED PARTNERSHIP () LIMITED LIABILITY () REINSTATEMENT () MERGER () WITHDRAWAL () CERTIFICATE OF CANCELLATION () OTHER: STATE FEES PREPAID WITH CHECK# 536640 FOR \$ 155.00 **AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:** COST LIMIT: \$____

PLEASE RETURN:

(XX) CERTIFIED COPY

() CERTIFICATE OF GOOD STANDING

() PLAIN STAMPED COPY

() CERTIFICATE OF STATUS

Examiner's Initials

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: Flood Risk Solutions, 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.") Delaware 27-3425976 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 09/08/2010 Perpetual (Duration: Year limited liability company will cease to exist or "perpetual") (Date of Organization) 6. Upon Filing (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7 1801 South Australian Avenue, Suite 100 West Palm Beach, FL 33409 (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: See Attached List 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: Any lawful business 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 penaltics of perjury that the facts stated herein are true.)

R. Daniel Freudenthal

Typed or printed name of signee

FLOOD RISK SOLUTIONS, LLC

LIST OF MEMBERS

Ralph Daniel Freudenthal and Christina Wilson Freudenthal, Tenants by the Entirety 2916 Washington Road West Palm Beach, FL 33405 Adam Lee Schlesinger and Karen Christine Schlesinger, Tenants by the Entirety 1010 Beach Drive Delray Beach, FL 33483

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 Lia	ability Company is:	
Flood Risk Solutions, LLC		
If unavailable, the alternate to b	be used in the state of Florida is:	
2. The name and the Florida str	reet address of the registered agent and office are:	
	NRAI Services, Inc.	
	(Name)	
:	2731 Executive Park Drive, Suite 4	
Flor	ida Street Address (P.O. Box NOT ACCEPTABLE)	
	Weston FL 33331 City/State/Zip	
liability company at the place des agent and agree to act in this cap	d agent and to accept service of process for the above stated limited signated in this certificate, I hereby accept the appointment as registered pacity. I further agree to comply with the provisions of all statutes	
	ete performance of my duties, and I am familiar with and accept the istered agent as provided for in Chapter 608, Florida Statutes.	
(Signature)	Lynne Roberts	
	Assistant Secretary	
	\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent	
	\$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional)	

Certificate of Status (optional)

\$ 5.00

Delaware

PAGE

The First State

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

DELAWARE, DO HEREBY CERTIFY "FLOOD RISK SOLUTIONS, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTY-SECOND DAY OF SEPTEMBER, A.D.

2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FLOOD RISK SOLUTIONS, LLC" WAS FORMED ON THE EIGHTH DAY OF SEPTEMBER, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

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Jeffrey W. Bullock, Secretary of State **AUTHENTYCATION:** 8241515

DATE: 09-22-10

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