

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900300836059

07/03/17: -01004--030 \*\*25.00

17 JUL -3 PH 4: 07

S. WARREN JUL 0 5 2017 Fidelity National Title Group 3210 El Camino Real, Suite 200 Irvine, CA 92602



June 28, 2017

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

Re: Hudson & Marshall, LLC

Application by Foreign Limited Liability Company to File Amendment

Dear Sir or Madam:

On behalf of the above-referenced company, enclosed is the following:

- One (1) original and one (1) copy of the executed Application by Foreign Limited Liability Company to File Amendment to Certificate of Authority to Transact Business in Florida, along with a Certificate of Good Standing and Certified Conversion from its domicile State of Delaware; and
- 2. Our check number 1001972469, made payable to the Secretary of State in the amount of \$25.00 to cover required filing fees and return a certified copy.

A self-addressed, stamped envelope is enclosed for your convenience in replying. If you have any questions regarding this filing, feel free to contact the undersigned.

( Xales )

Madeline G. M. Lovejoy Assistant Vice President

Assistant Secretary

Corporate Legal Administrator Telephone: (949) 255-9033 Facsimile: (714) 573-3920

E-mail: madeline.gm.lovejoy@fnf.com

### **COVER LETTER**

	-	tration S ion of C	Section orporations					
SUBJE	CT:	Hudson & Marshall, LLC						
		Name of Foreign Limited Liability Company						
Dear Si	r or M	ladam:						
The enc	losed	applicat	ion, certificate and fee(s)	are submit	ted for filing.			
Please r	eturn	all corre	espondence concerning this	s matter to	the following:			
Madelin	e G. M	I. Lovejo <sub>j</sub>	y					
			Name of Person					
Fidelity	Nation	nal Financ	rial, Inc.					
	-		Firm/Company					
3210 EI	Camin	o Real St	ee 200					
			Address					
Irvine, C	A 926	502						
			City/State and Zip Code	ı				
madeline	e.gm.lo	ovejoy@1	înfleom					
E-ma	iil add	ress: (to	be used for future annual	report not	ification)			
For furt	her in	formatic	on concerning this matter,	please cal	i:			
		I. Lovejoj	y	949	255-9033			
		Name	of Person	at ( Area (		e Telephone Number		
	Regis Divis Clifto 2661	tration S ion of C in Buildi Executiv	orporations		Registra Division P.O. Bo	NG ADDRESS: ntion Section n of Corporations ox 6327 ssee, Florida 32314		
Enclose ⊠ \$25 CR2E055	Filing	, Fee	for the following amount \$30 Filing Fee & Certificate of Status	S55	Filing Fee & rtified Copy	S60 Filing Fee. Certificate of Status & Certified Copy		

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

#### SECTION I (1-4 must be completed)

Name of limited liability Comp     Hudson & Marshall, LL			·	artment of		
State: Hudson & Marshall, LL		<del></del>	<del>-</del>	<del>_</del>		
Enter new principal office address	s, if applicable:		<del></del>	<del></del>		
( <u>Principal office address</u> <u>MUST BE A STREET ADDRES.</u>	<u>s</u> )					
Enter new mailing address, if appl ( <u>Mailing address</u> <u>MAY BE A POST OFFICE BOX</u>						
2. The Florida document number of	of this limited lial	oility company is	: <u>M1100000402</u>			
3. Jurisdiction of its organization:	Texas					
4. Date authorized to do business						
SECTION II (5-9 complete only						
5. New name of the limited liability	ity company:(must	contain "Limited	d Liability Compa	ny, " "L.L.C.," o	r "LLC."	)
(If name unavailable, enter alternations of the written consent of the must contain "Limited Liability Contains of the contain	managers or mar	aging members a	of transacting busi adopting the altern	ness in Florida ar nate name. The al	ternate na	a <b>≧7</b> JUL
6. If amending the registered agen registered agent and/or the new re	t and/or registere gistered office ad	d officer address dress here:	on our records. en	nter the name of t	henew	<u>-3</u>
Name of New Registered Agent:	CT Corporation :	System			<u> </u>	P
New Registered Office Address:	1200 South Pine	Island Rd			21 (. C) T [	£
	Plar	itation	Enter Florida St	reet Address , Florida 33324	36. 36.	07
		Cit		Zip 6	Code	
New Registered Agent's Signature I hereby accept the appointment at the provisions of all statutes relational accept the obligations of my parameter is being filed to merely tiability company has been notified.	is registered agei ive to the proper o position as registe reflect a change i	it and agree to ac and complete per cred agent as pro in the registered	formance of my d wided for in Chap	luties, and Lam fo ter 605, F.S. Or,	imiliar wi if this	it/i
	- If Cl	nanging Register	rd Agent, Signatur	re of New Registe	ered Ager	11

Fitle/ Capacity	<u>Name</u>	<u>Address</u>	Type of Action
CFO	Andrea Yadegar	14785 Preston Rd Ste 1150	⊠Add
		Dallas, TX 75254	Remo
EVP/S	Michael L. Gravelle	1701 Village Center Circle	⊠Add
		Las Vegas, NV 89134	Remo
AVP/AS	Madeline G. M. Lovejoy	3210 El Camino Real Ste 200	⊠Add
		Irvine, CA 92602	Remov
SVP/T	Daniel K. Murphy	601 Riverside Ave	<b>⊠</b> Add
		Jacksonville, FL 32204	Remove
	a certificate, if required: no more th	an 90 days old, evidencing the , led by the official having custody of records	Jadd Juli Add PH 6

Filing Fee: \$25.00

Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "HUDSON & MARSHALL, 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-EIGHTH DAY OF JUNE, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 202797795

Date: 06-28-17

6415538 8300 SR# 20174998861 <u>Delaware</u>

Page 1

The First State

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

DELAWARE, DO HEREBY CERTIFY THE ATTACHED ARE TRUE AND CORRECT

COPIES OF ALL DOCUMENTS ON FILE OF "HUDSON & MARSHALL, LLC" AS

RECEIVED AND FILED IN THIS OFFICE.

THE FOLLOWING DOCUMENTS HAVE BEEN CERTIFIED:

CERTIFICATE OF CONVERSION, FILED THE EIGHTEENTH DAY OF MAY,

A.D. 2017, AT 1:10 O'CLOCK P.M.

CERTIFICATE OF FORMATION, FILED THE EIGHTEENTH DAY OF MAY,

A.D. 2017, AT 1:10 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE

AFORESAID LIMITED LIABILITY COMPANY, "HUDSON & MARSHALL, LLC".

Authentication: 202720781

Date: 06-15-17

State of Delaware Secretary of State Division of Corporations Delivered 01:10 PM 05/18/2017 FILED 01:10 PM 05/18/2017 SR 20173695923 - File Number 6415538

# STATE OF DELAWARE CERTIFICATE OF CONVERSION FROM A NON-DELAWARE LIMITED LIABILITY COMPANY TO A DELAWARE LIMITED LIABILITY COMPANY PURSUANT TO SECTION 18-214 OF THE LIMITED LIABILITY ACT

1.)	The jurisdiction where the Non-Delaware Limited Liability Company first formed isTexas
2.)	The jurisdiction immediately prior to filing this Certificate is Texas
3.)	The date the Non-Delaware Limited Liability Company first formed is December 30, 2008
4.)	The name of the Non-Delaware Limited Liability Company immediately prior to filing this Certificate is Hudson & Marshall, LLC
5.)	The name of the Limited Liability Company as set forth in the Certificate of Formation is <u>Hudson &amp; Marshall</u> , <u>LLC</u> .
•	
1N 18	WITNESS WHEREOF, the undersigned have executed this Certificate on the the day of May, A.D. 2017
	By: Authorized Person
	Name: Trixy Castro, Manager

Print or Type

### STATE of DELAWARE LIMITED LIABILITY COMPANY CERTIFICATE of FORMATION

• First: The name of the limited liability company is
Hudson & Marshall, LLC
• Second: The address of its registered office in the State of Delaware is
The name of its Registered agent at such address is The Corporation Trust Company
• Third: (Insert any other matters the members determine to include herein.)
In Witness Whereof, the undersigned have executed this Certificate of Formation this 18th day of May, 2017  By: Authorized Person(s)  Name Trixy Castro  Typed or Printed

State of Delaware Secretary of State Division of Corporations Delivered 01:10 PM 05/15/2017 FILED 01:10 PM 05/18/2017 SR 20173695923 - File Number 6415538