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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Owen Agency LLC
Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the following:
Taylor Owen
Name of Person
Owen Agency LLC
Firm/Company
438 South Reed Ct.
Address
Lakewood, CO 80226
City/State and Zip Code
Taylor Owen [tmowen@aramcousa.com]
Taylor Owen [tmowen@aramcousa.com] E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Heather Morin 638-0785
Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS: Division of Corporations STREET ADDRESS: Division of Corporations
Registration Section Registration Section P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\int_{125.00}\$ \text{Filing Fee} \text{Fee} \text{\$\subseteq} \$\su



RECEIVED

11 DEC -9 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

November 8, 2011

TAYLOR OWEN OWEN AGENCY LLC 438 S REED CT LAKEWOOD, CO 80226

SUBJECT: OWEN AGENCY, LLC Ref. Number: W11000056941

We have received your document for OWEN AGENCY, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 911A00025368

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. Owen Agency 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.")
2. State of Colorado (Jurisdiction under the law of which foreign limited liability company is organized) 3. 26-3220654 (FEI number, if applicable)
4. 08/13/2008 (Date of Organization) 5. perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
6. 11/9/2011 (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 438 South Reed Ct.
Lakewood, CO 80226 (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:
438 South Reed Ct.
Lakewood, CO 80226
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 each of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: real estate acquisition

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Heather Morin

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 Liability Company is:	
Owen Agency LLC	
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:	
Heather Morin	
(Name)	
2025 1st St S	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
St Petersburg, FL 33705	
City/State/Zip	
Having been named as registered agent and to accept service of process for the above stationary company at the place designated in this certificate, I hereby accept the appointment agent and agree to act in this capacity. I further agree to comply with the provisions of a relating to the proper and complete performance of my duties, and I am familiar with and obligations of my position as registered agent as provided for in Chapter 608, Florida Stationary (Signature)	ent as registered ill statutes d accept the
ን 	2011 DI
\$ 100.00 Filing Fee for Application \$\frac{\frac{1}{2}}{2}\$	

Certified Copy (optional)

Certificate of Status (optional)

\$ 30.00

5.00

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE

I, Scott Gessler, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

Owen Agency, LLC

is a **Limited Liability Company** formed or registered on 08/13/2008 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20081431096.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 11/03/2011 that have been posted, and by documents delivered to this office electronically through 11/04/2011 @ 11:37:54.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 11/04/2011 @ 11:37:54 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 8083804.



Secretary of State of the State of Colorado

**********End of Certificate***********

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, http://www.sos.state.co.us/bip/CertificateSearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site. http://www.sos.state.co.us/click Business Center and select "Frequently Asked Questions."