

#M/200000/821

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

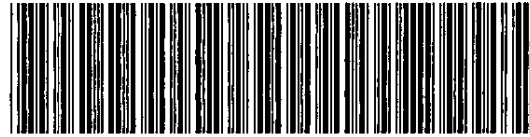
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/09/12--01026--013 **125.00

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12 MAR -9 PM 12:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER

APR 2 2012



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 13, 2012

CENTRAL LICENSING BUREAU, INC.
1501 NORTH UNIVERSITY, STE. 550
LITTLE ROCK, AR 72207-5271

SUBJECT: THE EVANS AGENCY, LLC
Ref. Number: W12000014064

We have received your document for THE EVANS AGENCY, 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):

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 Company," "L.C.," and "LC".

The document number of the name conflict is F09000004950 THE EVANS AGENCY, INC..

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly
Regulatory Specialist II

Letter Number: 412A00009061



Central Licensing Bureau, Inc.

1501 NORTH UNIVERSITY
SUITE 550
LITTLE ROCK, ARKANSAS 72207-5271
www.centrallicensingbureau.com
(501) 664-8044
FAX - (501) 664-6182

BILL WOODYARD
President

March 5, 2012

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Sir/Madam:

Enclosed please find the necessary documents to qualify **The Evans Agency, LLC** to transact business in your state.

I trust this letter and the enclosed documents place them in compliance with your state statutes. If any further action is required, please do not hesitate to contact me.

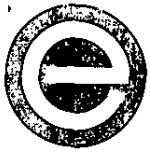
Thank you for your consideration of this filing.

Sincerely,

Brenda Anthony
Corporate Qualification Division

/bsa

Enclosures



THE EVANS AGENCY INSURANCE

FILED
12 MAR -9 PM 12:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

March 21, 2012

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: CONSENT TO USE SIMILAR NAME – THE EVANS AGENCY, LLC

Dear Sir/Madam:

This letter is to inform you that The Evans Agency, LLC is a related party of The Evans Agency, Inc. (Doc No. F09000004950) and as such is given our consent to use their similar proposed name while conducting business in your state.

If you have any questions or concerns, please do not hesitate to contact Brenda Anthony - Central Licensing Bureau at (501) 664-8044 or via email at corpqual@centrallicensingbureau.com

Sincerely,

David Nasca
Secretary
The Evans Agency, Inc.

DN/bsa

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Evans 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:

Brenda Anthony

Name of Person

Central Licensing Bureau

Firm/Company

1501 N University, suite 550

Address

Little Rock, AR 72207

City/State and Zip Code

acanast@evansagencyins.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brenda Anthony

Name of Person

at (501)

664-8044

Area Code & Daytime Telephone Number

MAILING ADDRESS:

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

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. The Evans 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. New York

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 16-1332767

(FEI number, if applicable)

4. 07/01/2011

(Date of Organization)

5. Perpetual

(Duration: Year limited liability company will cease to exist or "perpetual")

6.

(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 16 N Main Street, Angola, NY 14006

(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:

Robert G. Miller, Jr.

16 N Main Street, Angola, NY 14006

Nicholas J. Snyder

16 N Main Street, Angola, NY 14006

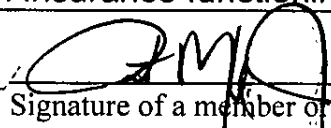
David J. Nasca

16 N Main Street, Angola, NY 14006

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:

The business of insurance functioning as a non-resident insurance agency.


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.)

Robert G. Miller, Jr.

Typed or printed name of signee

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12 MAR -9 PM 12:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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:

The Evans 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:

NRAI Services, Inc.

(Name)

515 East Park Avenue

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Tallahassee

FL 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 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.

NRAI Services, Inc.

By: 

(Signature)

WHL Woodyard IV, Assistant Secretary

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

State of New York
Department of State } ss:

I hereby certify, that EVANS MERGER SUB TWO, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 03/24/2011, and that the Limited Liability Company is existing so far as shown by the records of the Department.

A Certificate of Amendment EVANS MERGER SUB TWO, LLC, changing its name to THE EVANS AGENCY, LLC, was filed 06/10/2011.



*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 12th day of January two
thousand and twelve.*

First Deputy Secretary of State