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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

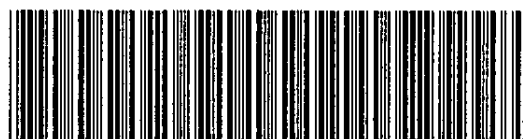
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 JUL 24 PM 4:57



**SESSIONS  
FISHMAN  
NATHAN &  
ISRAEL L.L.C.**  
ATTORNEYS AT LAW

TABITA K. MOELLER  
Paralegal Manager - Licensing Section  
Direct: (504) 846-7956  
Direct Fax: (504) 828-5770  
tmoeller@sessions-law.biz

July 23, 2012

Via FedEx

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

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DIVISION OF CORPORATIONS  
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**Re: Application for Authorization to Transact Business: North Shore Agency, LLC**

Dear Sir or Madam:

SESSIONS, FISHMAN, NATHAN & ISRAEL, L.L.C. represents North Shore Agency, LLC (NSA) for its corporate registrations.

Enclosed please find an Application for Authorization to Transact Business for NSA along with a check for \$125.00, for the filing fees.

Please forward confirmation of the enclosed to my attention. Should you have questions or need additional information, please do not hesitate to contact me. Thanking you for your time and attention I remain,

Very truly yours,

Tabita K. Moeller

Paralegal Manager-Licensing Section

**Enclosures**

\\sfns02\prolawdocs\11-2012-nsasos\north shore agencies, llc secretary of state filings 2012\840093.doc

Lakeway Two Suite 200 3850 North Causeway Boulevard Metairie, Louisiana 70002-7227

(504) 828-3700 (504) 828-3737 F www.sessions-law.com

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** North Shore 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:

Tabita Moeller

\_\_\_\_\_  
Name of Person

Sessions, Fishman, Nathan & Israel, LLC

\_\_\_\_\_  
Firm/Company

3850 N. Causeway Blvd., Suite 200

\_\_\_\_\_  
Address

Metairie, LA 70002

\_\_\_\_\_  
City/State and Zip Code

licensing@sessions-law.biz

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

For further information concerning this matter, please call:

Tabita Moeller

at ( 504 )

846-7956

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
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

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**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. North Shore 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 3. 45-3029508  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 8/17/2011 5. Perpetual  
(Date of Organization) (Duration: Year limited liability company will cease 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. 270 Spagnoli Road; Suite 110  
Melville, NY 11747  
(Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here ☒

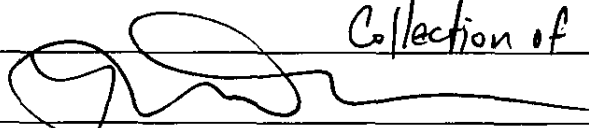
9. The name and usual business addresses of the managing members or managers are as follows:

Robert Engeman-6 Bridge Lane, Hicksville, NY 11801

Kevin Goodman-59 Valley View Road, Great Neck, NY 11021

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: \_\_\_\_\_

Collection of delinquent accounts  
  
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.)

Kevin Goodman

Typed or printed name of signee

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
JUL 26 PM 4:57

**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:

North Shore Agency, LLC

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If unavailable, the alternate to be used in the state of Florida is:

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2. The name and the Florida street address of the registered agent and office are:

Incorp Services, Inc.  
(Name)

17888 67th Court North  
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Loxahatchee FL 33470  
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.*

By:  Usel Robles for Incorp Services, Inc.  
(Signature)

\$ 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 NORTH SHORE AGENCY, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 08/17/2011, and that the Limited Liability Company is existing so far as shown by the records of the Department.



\*\*\*

*WITNESS my hand and the official seal  
of the Department of State at the City of  
Albany, this 03rd day of July two  
thousand and twelve.*

*First Deputy Secretary of State*