

M 1400 800FF67

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

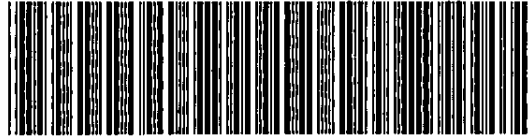
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers DEC 12 2014



111 N. Railroad St.
P O Box 390
Groesbeck, TX 76642
tel. 254.729.8002
*** ilsa101.com

December 3, 2014

Region Code 83

Florida Secretary of State
Division of Corporations
Corporate Filings
2661 Executive Center Circle
Tallahassee, FL 32301

Ref: Application for Certificate of Authority

Dear Sir/Madam:

We are filing the following documents on behalf of **Bedford Administrative Agency LLC**

The items checked below are enclosed.

<input checked="" type="checkbox"/>	Application for Certificate of Authority
<input checked="" type="checkbox"/>	Check #19302 Amount \$ 125.00
<input checked="" type="checkbox"/>	Certificate of Good Standing
<input checked="" type="checkbox"/>	RA Signature

Should you need anything further, please do not hesitate to contact me.

Please return all filed documents to my attention.

Sincerely,

Ashley Herring

Ashley Herring
Licensing and Compliance Specialist
111 N. Railroad
P.O. Box 390
Groesbeck, TX 76642
Ph: 254*729*6179
Fax: 254*729*8069
Email: aherring@ilsainc.com

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Bedford Administrative 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:

Ashley Herring

Name of Person

ILSA

Firm/Company

111 N Railroad Street

Address

Groesbeck, TX 76642

City/State and Zip Code

betty@lbcinc.com

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

For further information concerning this matter, please call:

Betty Agosto

Name of Contact Person

914 666-5121

at ()

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 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. Bedford Administrative 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. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. NY

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

3. 134186784

(FEI number, if applicable)

4. when filed

(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 2 Depot Plaza, Suite 301

Bedford Hills, NY 10507

(Street Address of Principal Office)

6. P.O. Box 476

Bedford Hills, NY 10507

(Mailing Address)

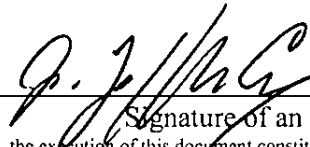
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are

J. Jeffers Cox President

2 Depot Plaza, Suite 301

Bedford Hills, NY 10507

8. 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)



Signature of an authorized person

(In accordance with section 605.0203, 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.)

J. Jeffers Cox

Typed or printed name of signee

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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:

Bedford Administrative 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:

C T Corporation System

(Name)

1200 South Pine Island Road

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

Plantation

FL

33324

City/State/Zip

Having been named as registered agent and to accept service of process for the above ~~named~~ 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 605, Florida Statutes.



Maria Ozaeta, Vice President

(Signature)

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

State of New York
Department of State } ss:

I hereby certify, that BEDFORD AGENCY LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 03/02/2000, and that the Limited Liability Company is existing so far as shown by the records of the Department.

A Certificate of Amendment BEDFORD AGENCY LLC, changing its name to BEDFORD ADMINISTRATIVE AGENCY LLC, was filed 05/17/2001.



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 25th day of November two
thousand and fourteen.*

Anthony Scardino

Executive Deputy Secretary of State