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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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MAR 27 2015 J. HARRIS

COVER LETTER

	ation Section n of Corporations			
SUBJECT: C	rawford Advisors, LLC			
	Name of Limited Liability Company			
	pplication by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of neck 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:			
	Steve Lawrence			
	Name of Person			
	Crawford Advisors, LLC			
	Firm/Company			
	c/o Herbert L. Jamison & Co., LLC 20 Commerce Dr., Suite 200			
	Address			
	Cranford, NJ 07016			
•	City/State and Zip Code			
	slawrence@jamisongroup.com			
-	E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:				
Ste	ve Lawrence 973 669-2301			
•	Name of Contact Person Area Code Daytime Telephone Number			
Divisior Registra P.O. Bo	NG ADDRESS: of Corporations bition Section x 6327 See, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle			
	Tallahassee, FL 32301			
	check for the following amount: .00 Filing Fee \$\Pi\$\$ \$\			



February 18, 2015

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

RE: CERTIFICATE OF AUTHORITY STATE OF FLORIDA

Please approve the Application for Authority for Crawford Advisors, LLC in the state of Florida. Enclosed are the following:

- 1. Application for Authority
- 2. Certificate of Good Standing from Sec. of State
- 3. Check in the amount of \$130

Please return the approved information to:

Crawford Advisors, LLC c/o Herbert L. Jamison & Co., LLC 20 Commerce Dr., Second Floor Cranford, NJ 07016 ATTN: Steve Lawrence

Very truly yours,

Stephen R. Lawrence Vice President Ph 973.669.2301 Fax 973.731.8439 slawrence@jamisongroup.com

Encl.



March 10, 2015

STEVE LAWRENCE HERBERT L JAMISON & CO, LLC 20 COMMERCE DR, SUITE 200 CRANFORD, NJ 07016

SUBJECT: CRAWFORD ADVISORS, LLC

Ref. Number: W15000016996

We have received your document for CRAWFORD ADVISORS, 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):

Chapter 605, Florida Statutes, does not allow limited liability companies to issue shares or stock. Consequently, limited liability company documents cannot contain any references/terms which may implicate otherwise. Please delete any references to terms such as "shares," "stock," "stockholders," "shareholders" or the like from your document.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

Please return 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) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 415A00004857

2015 MAR 24 PM 2: 06 SECRETARY OF STATE

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate liability Company," "L.L.C," or "LLC.")	nate name must include "Limited
2. Maryland 3. 7/31/14	
(Jurisdiction under the law of which foreign limited liability (FEI number, if a company is organized)	D (/) (#)
_{4.} 3/1/2015	ECRETARY I
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	HAA 2
_{5.} 200 International Circle Suite 4500	SSET SSET
Hunt Valley, MD 21031	# 2: FLO
(Street Address of Principal Office) 6. c/o Herbert L. Jamison & Co., LLC	06 RATE:
20 Commerce Dr., Suite 200 Cranford, NJ 07016	
(Mailing Address)	
	to manage is/are:
7. The name, title or capacity and address of the person(s) who has/have authority	
7. The name, title or capacity and address of the person(s) who has/have authority please see attached	
7. The name, title or capacity and address of the person(s) who has/have authority Please see attached	
Please see attached	
Please see attached 8. Attached is an original certificate of existence, no more than 90 days old, duly aut	
	(A photocopy is not

Dean Curtis, SR VP

Typed or printed name of signee

Crawford Advisors, LLC Officers & Directors

FEIN: 30-0837157

Name	Title	Business Address
Jim W. Henderson	Manager	200 Colonial Center Parkway Suite 150 Lake Mary, FL 32746
Thomas E. Riley	Manager	200 Colonial Center Parkway Suite 150 Lake Mary, FL 32746
Paul Vredenburg	Manager	200 Colonial Center Parkway Suite 150 Lake Mary, FL 32746
Eric Anderson	Authorized Representative	2305 River Rd. Louisville, KY 40206
Dean J. Curtis	Authorized Representative	200 Colonial Center Parkway Suite 150 Lake Mary, FL 32746
Stanley K. Kinnett, II	Authorized Representative	200 Colonial Center Parkway Suite 150 Lake Mary, FL 32746
Reagan Crawford	Authorized Representative	200 International Circle Suite 4500 Hunt Valley, MD 21031
AssuredPartners Capital, Inc.	Authorized Member	200 Colonial Center Parkway Suite 150 Lake Mary, FL 32746

SLORETARY OF STATE

2015 MAR 24 PH 2: 06

CONTRACT OF THE PROPERTY OF TH

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:	
Crawford Advi	sors, LLC		
If unavailable	, the alternate to be use	d in the state of Florida is:	
2. The name	and the Florida street a	ddress of the registered agent and office are:	2015 MAR 24 SECRETAR TALLAHASS
	Corporation Service (Company	HAR I
		(Name)	řń≪
	1201 Hays Street		
	Florida S	treet Address (P.O. Box NOT ACCEPTABLE)	2: 06 STATE LORID
	Tallehassee	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 605, Florida Statutes,

Corporation Service	Company	•	
By: Clical	ether De	neces	21_
	(Signature)		1
			1/

\$ 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 MARYLAND Department of Assessments and Taxation

I. PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO LIMITED LIABILITY COMPANIES, OR THE RIGHTS OF LIMITED LIABILITY COMPANIES TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT CRAWFORD ADVISORS, LLC, REGISTERED JULY 31, 2014, IS A LIMITED LIABILITY COMPANY EXISTING UNDER AND BY VIRTUE OF THE LAWS OF THE STATE OF MARYLAND, AND THAT THE LIMITED LIABILITY COMPANY IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING TO TRANSACT BUSINESS.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS FEBRUARY 11, 2015.

Paul B. Anderson

Paul B. Anderson Charter Administrator



301 West Preston Street, Baltimore, Maryland 21201 Telephone Balto. Metro (410) 767-1344 / Outside Balto. Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice Fax (410) 333-7097

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