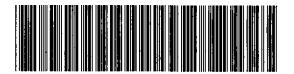
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(Re	equestor's Name)					
(Ac	ddress)					
(Ac	ddress)					
(Ci	ty/State/Zip/Phone	:#)				
PICK-UP	☐ WAIT	MAIL				
(Вс	usiness Entity Nam	ne)				
(Document Number)						
Certified Copies	_ Certificates	of Status				
Special Instructions to	Filing Officer:					

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MAY 2 5 2016

Y SULKER



May 16, 2016

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 AssuredPartners of Houston, 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:

AssuredPartners of Houston, 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.

#### **COVER LETTER**

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TO:

**Registration Section Division of Corporations** 

SUBJECT:	AssuredPartners of	Houston, LLC						
Name of Limited Liability Company								
		eign Limited Liability Comp d to register the above refere						
Please return	all correspondence of	concerning this matter to the	following:					
	Jordan Lawren	ce						
		Na	ame of Person					
	Herbert L. Jam	ison & Co., LLC						
		Fi	rm/Company					
	20 Commerce Dr, Ste 200							
	Address							
	Cranford, NJ 0	7016						
		City/St	ate and Zip Code					
	slawrence@jami	songroup.com						
		E-mail address: (to be used	for future annua	report not	ification)			
For further in	formation concerning	g this matter, please call:						
Jord	dan Lawrence		973 _ at (	669-23	44			
<del></del>	Name o	f Contact Person	Area Code	Day	time Telephone Number			
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations ion Section uilding cutive Center Circle ee, FL 32301				
	check for the follow 125.00 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filir Certified Copy		☐ \$160.00 Filing Fee, Co of Status & Certified Cop			

## 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:

1. AssuredPartners of Horo (Name of Fore	uston, LLC eign Limited Liability Company; m	ust include "L	imited Liability Co	ompany," "L.L.C.," o	or "LLC.")
	Iternate name adopted for the purpo	ose of transacti	ng business in Flor	rida. The alternate na	ame must include "Limited
Liability Company," "L.L.C,	" or "LLC.")				
2. TX	C 15 5 6 7 17 17 17 17 17 17 17 17 17 17 17 17 1	3	30-0914	number, if applicable	
company is organized)	of which foreign limited liability		(1.171	number, 11 applicabl	ie)
4. 6/1/2016					
T	(Date first transacted busin	ness in Florida	, if prior to registra	tion.)	
5. 211 East 7th Street Ste	(See sections 605.0904 & 60	5.0 <del>9</del> 05, r.s. R	determine penany	, naminy)	_
Austin, TX 78701					
	(Street Address of	f Principal Off	ice)		_
6. <u>c/o Herbert L. Jamison</u>	& Co., LLC 20 Commerce Dr,	Ste 200			_
Cranford, NJ 07016					
	(Mailing	g Address)		•	
7. Name and street address	ss of Florida registered agent: (1	P.O. Box NO	OT_acceptable)		Nen q
Name:	Corporation Service Company		•		<b>5</b>
Office Address:	1201 Hays Street				HAY 2
	Tallahassee		. Flori	ida <u>32301</u>	SE
	(City)		, <b>,</b>	(Zip code)	
designated in this applica to complywith the provision	rgistered agent and to accept se tion, I hereby accept the appoin ons of all statutes relative to the my position as registered agent Corpogation Service, Compa By: M. M.	ntment as reg e proper and	gistered agent an	d agree to act in t	hts capacina I further agr
	(Regi	stered agent's	signatur <b>e)</b>	/	
8. The name, title or capa	acity and address of the person(s	s) who has/ha	ve authority to m	anage is/are:	
Please See Attached	and address of the person(t	,,			
Tiedse See Attached					
	of existence, no more than 90 d of which it is organized. (If the ubmitted)				
	Signatur	re of an author	ized person		
	-		·	,	
	d in accordance with section 605 the Department of State constitution				

Typed or printed name of signee

Dean Curtis, SR VP

# AssuredPartners of Houston, LLC Officers & Directors

## FEIN: 30-0914815

AssuredPartners of Texas, LLC	Richard Harkwell	Randy Larsen	Walter Smith	Stanley K. Kinnett, II	Dean J. Curtis	Eric Anderson	Paul Vredenburg	Thomas E. Riley	Jim W. Henderson	Name
Member- 100% Shareholder	VP	President	Asst. Secretary	Chief Corporate Counsel, Asst. Secretary	SVP	SVP	Manager, EVP	Manager, SVP	Manager, SVP	Title

200 Colonial Center Parkway Suite 150 Lake Mary, FL 32746 2305 River Rd. Loutsville, Jky 40266 : 200 Colonial Center Parkway Suite 150 Lake Mary, FL 32746 200 Colonial Center Parkway Suite 150 Lake Mary, FL 32746 200 Colonial Center Parkway Suite 150 Lake Mary, FL 32746 200 Colonial Center Parkway Suite 150 Lake Mary, FL 32746 5201 Johnson Dr. Ste 500 Mission, KS 66205 11975 Westline Industrial Dr. Saint Louis, MO 63146 200 Colonial Center Parkway Suite 150 Lake Mary, FL 32746	Business Address 200 Cobnial Conter Parkway Suite 150 Lake Mary, FL 32746 200 Cobnial Conter Parkway Suite 150 Lake Mary, FL 32746
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## Resident Address

12319 Countryview Drive, Glen Allen, VA 23059 5309 W 99th Terrace Prairie Village, KS 66207 97 Quail Run, Glastonbury, CT 06033 2441 Alaqua Drive, Longwood, FL 32779 1954 Bridgewater Drive, Heathrow, FL 32746 1621 Oakhurst Ave. Winter Park, FL 32789 18420 Bridgemore Lane, Louisville, KY 40245-4382 2300 Forrest Rd. Winter Park, FI 32789 12808 Brighton Woods Dr. St. Louis, MO 63131

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Carlos H. Cascos Secretary of State

### Office of the Secretary of State

#### **Certificate of Fact**

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for AssuredPartners of Houston, LLC (file number 802394238), a Domestic Limited Liability Company (LLC), was filed in this office on February 18, 2016.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on April 29, 2016.



Phone: (512) 463-5555

Prepared by: SOS-WEB

Carlos H. Cascos Secretary of State