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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Body-Borneman Insurance and Financial Services, 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:

Andrew Hart

Name of Person

3H Corporate Services, LLC

Firm/Company

6 Clement Avenue

Address

Saratoga Springs, NY 12866

City/State and Zip Code

body@3hcs.com

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

For further information concerning this matter, please call:

Andrew Hart

518

583-0639 x116

at ()

Name of Contact 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 1, 2016

ANDREW HART
3H CORPORATE SERVICES, LLC
6 CLEMENT AVENUE
SARATOGA SPRINGS, NY 12866

SUBJECT: BODY-BORNEMAN INSURANCE AND FINANCIAL SERVICES LLC
Ref. Number: W16000053269

We have received your document for BODY-BORNEMAN INSURANCE AND FINANCIAL SERVICES 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):

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), Authorized Person (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: 416A00016102

FILED
16 AUG 10 PM 12:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 AUG 10 PM 3:36
TALLAHASSEE, FLORIDA

**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. Body-Borneman Insurance and Financial Services, 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. Pennsylvania

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

3. 73-1712037

(FEI number, if applicable)

4. N/A

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

5. 17 East Philadelphia Avenue

Boyertown, PA 19512

(Street Address of Principal Office)

6. PO Box 584

Boyertown, PA 19512

(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: 3H Agent Services, Inc.

Office Address: 1415 Panther Lane, Suite 327

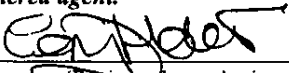
Naples, Florida 34109

(City)

(Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

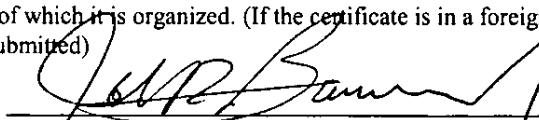
Gary Harker, President of 3H Agent Services, Inc

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

John R. Borneman, Jr. - 17 East Philadelphia Avenue Boyertown, PA 19512 - Manager

Howard E. Body - 17 East Philadelphia Avenue Boyertown, PA 19512 - Manager

9. Attached is a 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. (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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

John R. Borneman, Manager

Typed or printed name of signer

FILED
16 AUG 10 PM 12:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

07/28/2016

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

BODY-BORNEMAN INSURANCE AND FINANCIAL SERVICES LLC

is duly registered as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

Pedro A. Contes

Secretary of the Commonwealth

Certification Number: TSC160728151200-1

Verify this certificate online at <http://www.corporations.pa.gov/orders/verify.aspx>