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(City/State/Zip/Phone #)

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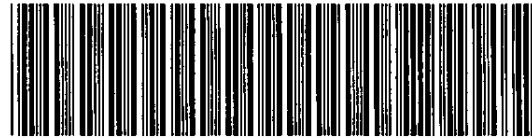
(Business Entity Name)

(Document Number)

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17 MAR 13 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. SCOTT

MAR 14 2017

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Employer's Risk Administrators, 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:

Maureen Vaughn

Name of Person

Employer's Risk Administrators, LLC

Firm/Company

801 E. Campbell Road, Suite 450

Address

Richardson, TX 75081

City/State and Zip Code

mvaughn@eradmincom

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

For further information concerning this matter, please call:

Maureen Vaughn

214

347-7938 ext. 103

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

FILED
17 MAR 13 PM 4:07
SECRETARY OF STATE
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. Employer's Risk Administrators, 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. Texas 3. 47-2253541
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. Expected start date: April 1st, 2017
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 801 E. Campbell Road, Suite 450
Richardson, TX 75081
(Street Address of Principal Office)

6. 801 E. Campbell Road, Suite 450
Richardson, TX 75081
(Mailing Address)

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

Name: InCorp Services, Inc.
Office Address: 17888 67th Court North
Loxahatchee, Florida 33470
(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.

Leora Nealey Leora Nealey for InCorp Services, Inc.
(Registered agent's signature)

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

Willis Deviney, President, 2200 Eutaw Springs, McKinney, TX 75070

Sharon McReynolds, Vice President, 901 Cedar View Lane, McKinney, TX 75070

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)

Sharon McReynolds
(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.

Sharon McReynolds

(Typed or printed name of signer)

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17 MAR 13 PM 4:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Rolando B. Pablos
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 Employer's Risk Administrators, LLC (file number 802093924), a Domestic Limited Liability Company (LLC), was filed in this office on November 03, 2014.

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 March 06, 2017.

FILED
17 MAR 13 PM 4:01
SECRETARY OF STATE
TALLAHASSEE, FL



A handwritten signature in black ink, appearing to read "R. Pablos".

Rolando B. Pablos
Secretary of State