3/22/2017

Division of Corporations

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000079540 3)))



H170000795403ABC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

File Second. Please file this registration

Division of Corporations

filing AFTER the withdrawal filing for fax 6

Fax Number : (850)617-6383

audit# H17000079535 has been completed.

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

Foreign Limited Liability Company Scabury & Smith LLC Certificate of Status Certified Copy Page Count Estimated Charge \$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

8 Warren MAR 23 2017

•	
· · · · · · · · · · · · · · · · · · ·	OVER LETTER
TO: Registration Section	•
Division of Corporations	
•	
SUBJECT: Seabury & Smith LLC	
Name o	f Limited Liability Company
Existence, and check are submitted to register the above refe	mpany for Authorization to Transact Business in Florida," Certificate erenced foreign limited liability company to transact business in Flori
Please return all correspondence concerning this matter to th	e fallowing:
Ocean Calculus	.*
Ozen Gokalan	Name of Person
•	This of the soli
Marsh & McLennan Companies	Inc.
	Firm/Company
	• •
1166 Avenue of the Americas	•
,	Address
New York, NY 10036	
	State and Zip Code
1.1.	
ozen.gokalan@mmc.com	ed for future annual report notification)
, Dribbin dollars, No be da	iou to tututo armane report normanion;
For further information concerning this matter, please call:	
· · · · · · · · · · · · · · · · · · ·	
Ozen Gokalan	at (212) 345-2324
Name of Contact Person	Area Code Daytime Telephone Number
MAILING ADDRESS:	STREET ADDRESS:
Division of Corporations	Division of Corporations
Registration Section	Registration Section
P.O. Box 6327	Clifton Building
Tallahnssee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

\$160.00 Filing Fee, Certificate

of Status & Certified Copy

124\$155.00 Filing Fee &

Certified Copy

Enclosed is a check for the following amount:

\$\sum \frac{1}{2}\$125.00 Filing Fee \$\preceq\$ \$\sum \frac{1}{2}\$130.00 Filing Fee \$\preceq\$

Certificate of Status

FLOST - 09/18/0915 CT Piting Massager Union



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:

Channel Company, 13,15,10	allemate name adopted for the purpose of transacting	business in Florids. The alternate num	e must include '	'Limi
2. Delaware	3.			
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, If applicable)	····	
Λ	,			
7	(Date first transacted business in Florida, if (See sections 605.0904 & 605.0905, F.S. to d	prior to registration.)	· ·	
		etermine positity (100) (11)		
5, 1100 Avenue of the A	mericas, New York, NY 10036		•	
	·			
	(Street Address of Principal Office)		
6. Same			is m	- 2 - 2 - 1
	•	.e	., 5	1 **.
	(Mailing Address)		71-5	1
7 Name and street addre	ss of Fiorida registered agent: (P.O. Box NOT	accentable)	, <u>, , , , , , , , , , , , , , , , , , </u>	Þ
		"non-brance)	25	-
Name:	C T Corporation System	····	<u>- ∑</u> ≥	ر م در
Office Address:	1200 South Pine Island Road		D€	7
	Plantation	Pt- 14- 22204		••
	[IGHI ALIUNI	210709 311/4		
Registered agent's acception to the second s	(City) ptance: egistered agent and to accept service of process	, Florida 33324 (Zip code) : for the above stated limited Habil.	ity company a	t the
Having been named as r designated in this applica to complywith the provis- accept the odligations of	(City)	(Zip code) : s for the above stated limited Habil tered agent and agree to act in this unplete perfourance of my duties,	capacity. 1 A	unhe
Heving been named as redesignated in this applicate to complywith the provision accept the billigations of the AMINTA GRAY	ptance: egistered agent and to accept service of process allon, I bereby accept the appointment as regis ions of all statutes relative with proper and co my position as registered agent. C.T. Corporation Sys	(Zip code) : for the above stated limited liabil tered agent and agree to act in this implete performance of my duties,	capacity. 1 A	unhe
Having been named as redesignated in this applicate complywith the provise accept the billigations of the AMERICAN GRAY 8. The name, title or cap	ptance: egistered agent and to accept service of process allon, I bereby accept the appointment as regis ions of all statutes relative with proper and co my position as registered agent. C.T. Corporation Sys	(Zip code) : s for the above stated limited Habil tered agent and agree to act in this unplete performance of my duties, sight nature) suthority to manage isture:	capacity. 1 A	unhe
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Having been named as redesignated in this applicate to complywith the provise accept the billigations of the American Section 2018 American Section 1918 American Section 1918 American Please 9. Attached is a certificate jurisdiction under the law	ptance: egistered agent and to accept service of process ation, I beredy accept the appointment as registered agent. By CT Corporation System active and address of the person(s) who has have a see attached directors and off cof existence, no moto than 90 days old, duly au of which it is organized. If the certificate is in submitted)	(Zip code) : If you the above stated limited Habilitered agent and agree to act in this complete performance of my duties, signify authority to manage isture: incers of the LLC.	s capacity. I fi	urthe War

Seabury & Smith LLC

Directors:

Martin SOUTH

Director

Kevin TOBIN

Director

Officers:

Karen

FARRELL

Assistant Treasurer

Martin

SOUTH

Chairman

Kevin

TOBIN

President

Lawrence

LEHAN

Secretary

Ferdinand

JAHNEL

Treasurer

Joseph P.

GIGLIOTTI

Vice President -

コード C

CRETARY OF STATE

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SEABURY & SMITH LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE TWENTY-SECOND DAY OF MARCH, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

934791 8300 SR# 20171917334

Authentication: 202241903

Date: 03-22-17

You may verify this certificate online at corp.delaware.gov/authver.shtml