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SECRETARY OF STATE

COVER LETTER

	istration Section ision of Corporations					
SUBJECT:	PROMINENT Title Agency, 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:						
	JOSEPH L. BROOKS Name of Person					
	Prominent Tith Agency LLC Firm/Company					
	7365 E. KEMPER Rd Suite B	4				
	Address	A				
	Cincinnati OHio 45249 City/State and Zip Code	ALLABASSES				
	City/State and Zip Code					
Cincinnati OHio 45249 City/State and Zip Code Joee PTA gency.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:						
For further in	formation concerning this matter, please call:	20.				
	Name of Contact Person at (513) 477-2013 Area Code Daytime Telephone Number					
Div Reg P.O	ILING ADDRESS: sion of Corporations Division of Corporations istration Section Box 6327 Box 6					
	check for the following amount: 125.00 Filing Fee					

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

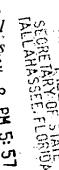
COMPANYTOTRANSACTBUSEN	IN 605.0902, FLORIDA STATUTES, THE I IESS INTHE STATE OF FLORIDA:) LIABILITY
1. Name of Poreign Lim	ominent Title Ited Liability Company; must include "Limi	Agency ted Liability Company, "LLC	LLC,	-
(If name ensevailable, enter alternate name	adopted for the purpose of transacting business in F	lorida. The alternate name must include	is "Limited Liability Company," "L.L.C," or "LI	_ .c. [,])
	Ohio foreign limited liability company is organized)		68-0580594 (PEI number, if applicable)	-
4	(Date first transacted business in Florida, if prior t (See sections 605.0904 & 605.0903, F.S. to deter	to registration.)		
5. 7365 E. K	_	72 <i>(</i>	S E KEMPET RJ	
	emper Rd	6. <u> </u>	Mailing Address) Suite B asign OB 45249	-
Suite B			Suite B	-
<u>Cincinnati</u>) } 45249	Cincinn	ary BB 45249	
7. Name and street address of	f Florida registered agent: (P.O. Bo	•		扩系
Name:		ion Syskm		=4
Office Address:	1200 South Pine			8
	Plantation	, Florida	33324	3
Registered agent's acceptan	(City)	,,,,	(Zip code)	ب
to comply with the provisions	a, I hereby accept the appointment of all statutes relative to the profit my position as registered agent. (Registered agent	or and complete performa	nce of my duties, and I am famili from 54 StC17 Jenifer Vincent	ar with
Title or Canacity:	y and address of the person(s) who hame and Address:		ce President & Assistant Se go is/are: Name and Address	
Joseph Browks	7365 E Kemper Re Suite B Concinnation us			
<u>Debra Brouks</u>	7365 E Kemper Re Suite B Cincinnati 6H y	2d <u>Vice-Presiden</u> 15249	nT	
(Use attachments if necessary	'n	•		
	•	ate is in a foreign language	, a translation of the certificate un	
	Jany L 1	ne of an authorized person		
	i in accordance with section 605.020 Department of State constitutes a ti	bird degree felony as provi	ided for in s.B17.155, F.S.	tion
	JOSEPH	L BROOKS or printed name of signes		
	-,,,	,		

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

COMPANY TO TRANSACT BUSINES			
1. Name of Foreign Limite	ninent Title d d Liability Company; must include "Limited L	Agency, LLC.	")
	pted for the purpose of transacting business in Florida		
2. State of (Jurisdiction under the law of which fore	Ohio	3. 68-0 (FEI nu	580594 mber, if applicable)
4	Date first transacted business in Florida, if prior to regioe sections 605.0904 & 605.0905, F.S. to determine p	stration.)	
5: 7365 E. Ke (Street Address of Principal	mper RJ	7365 E.	KEMPET RA
(Street Address of Principal	Office)	(Mailing Ac	Idress) R
Suite B Cincinnati Ol	+ 45249	Cincinnation	OH 45249 & SER
			KEMPET RAISETTARY OH 45249 8 PETERLO
Name:	CT Corporation	n System	v
Office Address:	C'T Corporation 200 South Pine Plantation (City)	15 land Rd	— 9
	Plantation	, Florida 333	24
	I hereby accept the appointment as r f all statutes relative to the proper an y position as registered agent.		
	(Registered agent's sign	ature)	
8. The name, title or capacity a <u>Title or Capacity:</u>	nd address of the person(s) who has/h Name and Address:	nave authority to manage is/are: Title or Capacity:	Name and Address:
Joseph Browks	7365 E Kemper Rd Suite B Cincinnation 45240		
Debra Browks	7365 E Kemper Rd Suite B Cincinnati OF 4524	Vice-President	
(Use attachments if necessary)			
	istence, no more than 90 days old, dui ich it is organized. (If the certificate is ed)		
	Jan L B	l_	
	Signature of a	n authorized person	
	n accordance with section 605.0203 (I Department of State constitutes a third	degree felony as provided for ir	n s.817.155, F.S.
	JOSEPH L	BROOKS nted name of signee	
	I yped or pri	neo name oi signee	

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show PROMINENT TITLE AGENCY, LLC, an Ohio Limited Liability Company, Registration Number 1447109, was organized within the State of Ohio on April 1, 2004, is currently in FULL FORCE AND EFFECT upon the records of this office.





Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 4th day of May, A.D. 2017.

Ohio Secretary of State

for Hastel

Validation Number: 201712403098