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**Florida Department of State
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : INCORP SERVICES INC
Account Number : I20120000007
Phone : (702) 866-2500
Fax Number : (702) 866-2689

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**Foreign Limited Liability Company
BSC Agency, LLC**

Certificate of Status	0
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S. WARREN

AUG 21 2017

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BSC 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.

Joanna Fernandez

Name of Person

InCorp Services, Inc.

Firm/Company

3773 Howard Hughes Pkwy, Ste 500S

Address

Las Vegas, NV 89169

City/State and Zip Code

Documents@incorp.com

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

For further information concerning this matter, please call

Joanna Fernandez for InCorp Services, Inc.

Name of Contact Person

at (800)

Area Code

246-2677

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

4170002303403

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 BSC Agency, 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 Iowa 3 _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. Upon Registration
(Date first transacted business in Florida, if prior to registration)
(See sections 603.0904 & 603.0905, F.S. to determine penalty liability)

5 1025 Ashworth Road 6 1025 Ashworth Road
(Street Address of Principal Office) (Mailing Address)
Suite 101 Suite 101
West Des Moines, IA 50265 West Des Moines, IA 50265

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.

Joanna Fernandez Joanna Fernandez on behalf of 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:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
Manager	Jon Shanahan 1025 Ashworth Rd, Ste 101 West Des Moines, IA 50265	Manager	Rae Shanahan 1025 Ashworth Rd, Ste 101 West Des Moines, IA 50265
Manager	Todd Seiffer 1025 Ashworth Rd, Ste 101 West Des Moines, IA 50265		

(Use attachments if necessary)

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)

10 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.

Todd Seiffer
Signature of an authorized person

Todd Seiffer

Typed or printed name of signer

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**IOWA SECRETARY OF STATE
PAUL D. PATE**



CERTIFICATE OF EXISTENCE

Date: 7/26/2017

Name: BSC AGENCY, LLC (489DLC - 525468)

Date of Incorporation: 6/24/2016

Duration: PERPETUAL

I, Paul D. Pate, Secretary of State of the State of Iowa, custodian of the records of incorporations, certify the following for the limited liability company named on this certificate:

- a. The entity is in existence and duly incorporated under the laws of Iowa.
- b. All fees, taxes and penalties required under the Revised Uniform Limited Liability Company Act and other laws due the Secretary of State have been paid.
- c. The most recent biennial report required has been filed with the Secretary of State.
- d. The Secretary of State has not administratively dissolved the limited liability company.
- e. The Secretary of State has not filed either a statement of dissolution or statement of termination.

Certificate ID: CS138109

To validate certificates visit:
sos.iowa.gov/ValidateCertificate

Paul D. Pate, Iowa Secretary of State

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