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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

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(Business Entity Name)

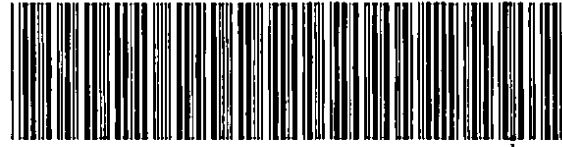
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O. SIMMONS
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Thomas Title & Escrow, LLC "d.b.a Thomas National Settlement 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

Roberto Abreu
Name of Person

Pinnacle Creative Studio
Firm/Company

81 Murray Street, Unit 1
Address

New York, NY 10007
City/State and Zip Code

roberto@pinnaclecreativestudio.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Roberto Abreu at (860) 7169665
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

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. Thomas Title & Escrow, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
Thomas National Settlement Services, 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. Wyoming (Jurisdiction under the law of which foreign limited liability company is organized) 3. 36-4867539 (EIN number, if applicable)

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

5. 3033 S. Parker Rd. (Street Address of Principal Office)
Ste 110
Aurora, CO. 80014

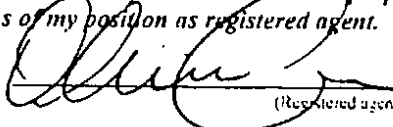
6. 3033 S Parker Rd. (Mailing Address)
Ste 110
Aurora, CO 80014

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.

 Olivia Gonzales on behalf of InCorp Services, Inc.
(Registered agent's signature)

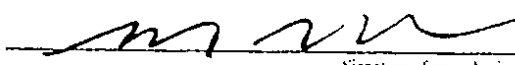
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>President</u>	<u>John P. Dwyer</u> <u>3033 Parker Rd., Ste 110</u> <u>Aurora, CO. 80014</u>	<u>Sr. Vice President</u>	<u>Francis W. Busch</u> <u>3033 Parker Rd., Ste 110</u> <u>Aurora, CO. 80014</u>
<u>Secretary</u>	<u>Meghan Martelon</u> <u>3033 Parker Rd., Ste 110</u> <u>Aurora, CO. 80014</u>		

(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.


Signature of an authorized person
Meaghan Martelon - General Counsel/Secretary
Typed or printed name of signer

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 17 OCT 30 AM 8:29
 DEPARTMENT OF STATE

STATE OF WYOMING
Office of the Secretary of State

I, ED MURRAY, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

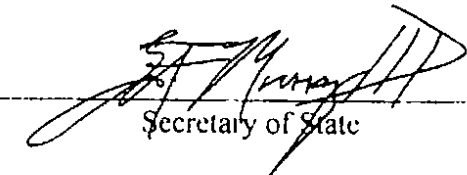
Thomas Title & Escrow LLC
is a
Limited Liability Company

formed or qualified under the laws of Wyoming did on **May 2, 2017**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2017-000752296**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 9th day of October, 2017 at 11:50 AM. This certificate is assigned 024363228.




Secretary of State