# M18000004497

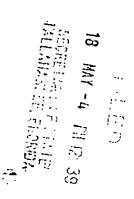
(Requestor's Name)								
(Address)								
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(Business Entity Name)								
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O SIMMONS MAY 0 8 2018

### **COVER LETTER**

TO:	Registration Section Division of Corporations			• ,					
SUBJE	Brooks Group Insurance Agency LLC								
00.001		of Limited Liability	Company						
The end Existen	closed "Application by Foreign Limited Liability Co ice, and check are submitted to register the above re	ompany for Authoriza ferenced foreign limi	ation to Tr ited liabilit	ansact Business in Florida," Cer y company to transact business	rtificate of in Florida.				
Please	return all correspondence concerning this matter to t	the following:							
	Marcia Simon								
	•	Name of Person	<del></del>	<del></del>					
	Brooks Group Insurance Agency LLC								
	Firm/Company								
	6320 Canoga Avenue, 12th Floor								
	Address								
	Woodland Hills, CA 91367								
	City	y/State and Zip Code							
	msimon@venbrook.com								
	E-mail address: (to be u	ised for future annual	report no	tification)					
For furt	her information concerning this matter, please call:								
	Marcia Simon	818 at (	598-89	11					
	Name of Contact Person	Area Code	Day	rtime Telephone Number					
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		Division Registrat Clifton B 2661 Exe	of Corporations ion Section milding centive Center Circle see, FL 32301					
Enclose	d is a check for the following amount:  ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status	: 🔲 \$155.00 Filin Certified Copy	ig Fee &	☐ \$160.00 Filing Fee, Certifi of Status & Certified Copy	cate				

## 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.	Brooks Group Insurance		y LLC ability Company, must include "Limite	d Liabili	ry Company," "L.L.C.," or "L.L.C."	<del>)</del>
	(1121110 01 1 21-1811				,,,	· 
(If n	ame unavailable, enter alternate n	me adopted	for the purpose of transacting business in Flo	rida. The a	lternate name must include "Limited Lia	bility Company," "L.L.C," or "LLC.")
2 l	New Jersey			3.	35-2558040	
		nich foreign	limited liability company is organized)	-	(FEI avm	ber, if applicable)
4.	5/1/18		Control of the contro			
		(See s	first transacted business in Florida, if prior to ections 605.0904 & 605.0905, F.S. to determ	ine penalty	liability)	
5.	70 Bridge Plaza Drive			6.	6320 Canoga Avenue, 12th	
	(Street Address of F	rincipal Off	ce)		(Mailing Add Woodland Hills, CA +136	
	Manalapan, NJ 07726		··· ·		Woodiand Hills, CA +136	(17)
			<u> </u>			<del></del>
7.	Name and street addres	<u>s</u> of Floi	ida registered agent: (P.O. Box	NOT	acceptable)	
	Name:	Corpor	ate Service Company			<u> </u>
	Office Address:	1201 H	ays Street			in the second se
		Tallah	issee		, Florida <u>32301</u>	
	gistered agent's accep		(City)		(Zip cou	de)
		<u> </u>	ace CKNDig (Registered agent's		ace E. Kirby, Asst. Vice	President
8.	The name, title or capa Title or Capacity:	city and	address of the person(s) who have and Address:		authority to manage is/are:	Name and Address:
	Chief Executive Office	:	Jason D Turner	C	hairman of the Boar	William Lopatin
		-	6320 Canoga Avenue. 12th F Woodland Hills, CA 91367			6320 Canoga Avenue. 12th Fl Woodland Hills. CA 91367
		-				
(U	se attachments if neces	sary)		_		<del></del>
jur. of 1 10.	isdiction under the law of the translator must be so . This document is exect	of which abmitted uted in a		te is in a	n foreign language, a transla	tion of the certificate under oath
			The second of the		#	
			Signature	of an aut	reson	
		Jason D	Turner			
			Typed o	r printed n	ame of signee	

# STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

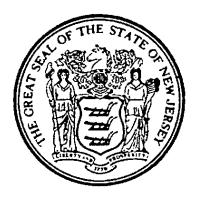
#### BROOKS GROUP INSURANCE AGENCY LLC 0600430246

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on March 31, 2016.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey. Annual Reports are outstanding for the following year(s): 2018

I further certify that the registered agent and office are:

CORPORATION SERVICE COMPANY PRINCETON SOUTH CORPORATE CTR STE 160, 100 CHARLES EWING BLVD EWING, NJ 08628



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 3rd day of May, 2018

Elizabeth Maher Muoio State Treasurer

dux A Mun

Certificate Number: 6088000677

Verify this certificate online at

https://www.l.state.nj.us/TYTR\_StandingCert/JSP/Verify\_Cert.jsp