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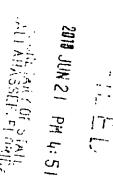
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

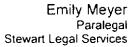


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Real partners. Real possibilities.™

June 20, 2018

VIA FEDERAL EXPRESS

Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314

Re: Application by Foreign

Dear Madam or Sir,

Enclosed for filing is an Application by Foreign Limited Liability Company for Authorization to Transaction Business in Florida for Stewart Solutions, LLC. Also enclosed is Stewart's Check Number 2600000185 in the amount of \$125.00 for payment of the registration fee along with a current Certificate of Fact for the applicant.

Please contact me at 713-625-4108 or <u>Emily.Meyer@stewart.com</u> if any issues arise in connection with this filing.

Sincerely,

Enclosures

COVER LETTER

TO:

Registration Section

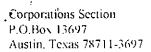
Div	ision of Corporatio	ns				
SUBJECT:	STEWART SOLU	TIONS, LLC				
	-	Name of	Limited Liability (Company		
		reign Limited Liability Comp ed to register the above refer				
Please return	all correspondence	concerning this matter to the	following:			
	EMILY MEY	ER				
		N	ame of Person		-	
	STEWART TI	TLE COMPANY				
		Fi	irm/Company			
	1980 POST O	AK BLVD. SUITE 710				
	 .		Address			
	HOUSTON, T	EXAS 77056				
		City/S	tate and Zip Code			
	EMILY.MEYER	R@STEWART.COM				
		E-mail address: (to be used	d for future annual	report not	ification)	
For further in	nformation concernin	g this matter, please call:				
EN	HLY MEYER		713 at (625-410	08	
	Name o	of Contact Person	Area Code	Day	time Telephone Number	
Div Reg P.O	MLING ADDRESS: ision of Corporations distration Section Box 6327 lahassee, FL 32314			Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations ion Section uilding cutive Center Circle ee, FL 32301	
	check for the follow 125.00 Filing Fee	ring amount: \$\text{\text{\$\exitt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\exitt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\exitt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\exitt{\$\text{\$\exitt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\exitt{\$\text{\$\}\$\text{\$\text{\$\exitt{\$\text{\$\text{\$\tex{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$	S155.00 Filin Certified Copy	ig Fee &	☐ \$160.00 Filing Fee, Cer of Status & Certified Copy	

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

IN COMPLIANCE WITH SECTION 6/5.0902. FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	mine despited for the purpose of managering out the	ess in monda, The alternate name must include "Limit	ted Fiability Company," "Lill, C," or "LI, C,"
TEXAS		3. 20-0726763	
(Jurisdiction under the law of w	hich toreign limited liability company is organized	d) (FE	I number, it applicable)
N/A			
	(Date first transacted business in Florida, if (See sections 605,0904 & 605,0905, F.S. ta	f prior to registration.) to determine penalty liability)	
1200 SOUTH PINE IS		6. 9555 W SAM HOUST	TON PKWY SOUTH
(Street Address of			ng Address)
		SUITE 500	
PLANTATION, FL 33	3324	HOUSTON, TEXAS 7	77099
Name and street address Name: Office Address:	ss of Florida registered agent: (P.C C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND D	1	
	PLANTATION	Worldn 33324	
aving been named as re signated in this applica comply with the provis	(City) otance: egistered agent and to accept servi ntion, I hereby accept the appointn	. Florida 33324 (2) (2) (3) (4) (6) (7) (7) (8) (8) (9) (9) (9) (1) (1) (1) (1) (1	nited liability company at the poact in this capacity. I further
esignated in this application comply with the provis	otance: registered agent and to accept servi ution, I hereby accept the appointn ions of all statutes relative to the p is of my position as registered agen (Registered	ice of process for the above stated lin ment as registered agent and agree to proper and complete performance of nt. Higeli's signature	nited liability company at the poact in this capacity. I further
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Typed or printed name of signee





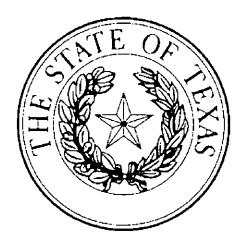
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Organization for STEWART SOLUTIONS, LLC (file number 800303641), a Domestic Limited Liability Company (LLC), was filed in this office on February 10, 2004.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on June 06, 2018.



Phone: (512) 463-5555



Rolando B. Pablos Secretary of State

Fax: (512) 463-5709 Prepared by: SOS-WEB