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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

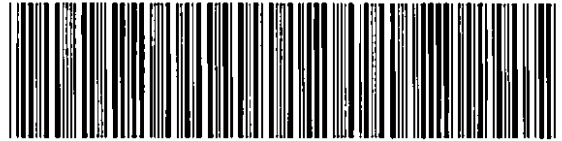
Certified Copies _____

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Special Instructions to Filing Officer:

Penalty W19-27199

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03/20/19--01003--004 **155.00

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 20, 2019

EMMA PARRISH
4510 COX RD, STE 111
GLEN ALLEN, VA 23060

SUBJECT: TOWERS ADMINSTRATORS LLC
Ref. Number: W19000027199

We have received your document for TOWERS ADMINSTRATORS LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$638.75.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons
Regulatory Specialist III

Letter Number: 919A00005509

TOWERS ADMINISTRATORS LLC

4510 Cox ROAD, SUITE 111
GLEN ALLEN, VA 23060
804-273-9797 / 877-673-9797
FAX: 804-273-9989

April 9, 2019 – sent via UPS overnight

Florida Secretary of State
Division of Corporations, Amendment Section
2661 Executive Center Circle
Tallahassee FL 32301

RE: Conversion of Towers Administrators, Inc. to Towers Administrators LLC
Entity #F98000000543 (Inc) / W19000027199 (LLC)
Your Letter Number 919A00005509

Dear Ms. Simmons:

Pursuant to our receipt of your letter dated March 20th and your telephone conversation today with Lori Mills in our office, please note the following:

- The purpose of our filings was to accomplish the simultaneous conversion of Towers Administrators, Inc., a New York corporation, into Towers Administrators LLC, a Delaware LLC.
- We have received confirmation of the withdrawal of Towers Administrators, Inc. as of March 13, 2019.
- The date of 12/31/2018 as shown on the LLC application item 4 was our error in completion of the form. The date of 12/31/2018 is the date that Towers Administrators LLC came into existence. Item 4 should have been left blank.

With this notation of error, please continue processing the registration of Towers Administrators LLC with the following items enclosed:

- Copy of your March 20, 2019 letter indicating the filing of Towers Administrators LLC was being pended for annual report and penalty fees.
- Application by Foreign LLC to Transact Business (in duplicate) including
 - o DE Certificate of Good Standing

Thanks in advance for your assistance in this matter.

Sincerely,



Joe Kern
Manager, Assistant Vice President

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Towers Administrators 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:

Emma Parrish
Name of Person

Towers Administrators LLC
Firm/Company

4510 Cox Road, Suite 111
Address

Glen Allen VA 23060
City/State and Zip Code

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

For further information concerning this matter, please call:

Emma Parrish at (804) 273-9797
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:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- ☐ \$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. Towers Administrators, 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. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 13-2552332
(FEI number, if applicable)

4. 12/31/2018
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 4510 Cox Road, Suite 111
(Street Address of Principal Office)

6. 4510 Cox Road, Suite 111
(Mailing Address)

Glen Allen VA 23060

Glen Allen VA 23060

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(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.

Deb Reeves
Assistant Vice President



(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: **Name and Address:**

☒ Manager Name: Richard A. Bates

☐ Member Address: 99 High Street

☐ Authorized Boston MA 02110

Person _____

☐ Other _____ ☐ Other _____

Title or Capacity: **Name and Address:**

☒ Manager Name: Benjamin C. Adams

☐ Member Address: 99 High Street

☐ Authorized Boston MA 02110

Person _____

☐ Other _____ ☐ Other _____

☒ Manager Name: Gregg Kelley

☐ Member Address: 99 High Street

☐ Authorized Boston MA 02110

Person _____

☐ Other _____ ☐ Other _____

☒ Manager Name: Benjamin R. Preston

☐ Member Address: 99 High Street

☐ Authorized Boston MA 02110

Person _____

☐ Other _____ ☐ Other _____

☒ Manager Name: Joe Kern

☐ Member Address: 99 High Street

☐ Authorized Boston MA 02110

Person _____

☐ Other _____ ☐ Other _____

☒ Manager Name: Sarah Mullins

☐ Member Address: 99 High Street

☐ Authorized Boston MA 02110

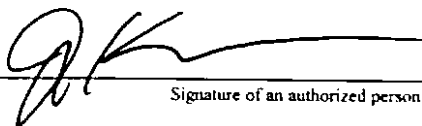
Person _____

☐ Other _____ ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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

Joe Kern

Typed or printed name of signee

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TOWERS ADMINISTRATORS LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF MARCH, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TOWERS ADMINISTRATORS LLC" WAS FORMED ON THE THIRTY-FIRST DAY OF DECEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



7217265 8300

SR# 20192180909

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 202494460

Date: 03-21-19