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JUL 25 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bridgenet Insurance 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:

Kathy M. Hennessey

Name of Person

Smith, Gambrell & Russell, LLP

Firm/Company

50 N. Laura Street, Suite 2600

Address

Jacksonville, Florida 32202

City/State and Zip Code

khennessey@sgrlaw.com

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

For further information concerning this matter, please call:

Kathy M. Hennessey

904

598-6134

at

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

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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. Bridgenet Insurance 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. Delaware 3. 82-4556446
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. 49 Archdale Street, Suite 2F 6. 49 Archdale Street, Suite 2F
(Street Address of Principal Office) (Mailing Address)

Charleston, South Carolina 29401 Charleston, South Carolina 29401

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

Name: Thomas E. Gibbs

Office Address: 50 N. Laura Street, Suite 2600

Jacksonville 32202
(City) , Florida (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.


(Registered agent's signature)

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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: BNI Investors, LLC

☒ Member Address: 50 N. Laura Street, Suite 2600

☐ Authorized Jacksonville, FL 32202

Person Dix Druce

☐ Other _____ ☐ Other _____

☐ Manager Name: C. Timothy Morris

☒ Member Address: 398 Laurel Mountain Trail

☐ Authorized Saluda, NC 28773

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: Dan Schlemmer

☒ Member Address: 2728 N. Lincoln Ave.

☐ Authorized Chicago, IL 60614

Person _____

☐ Other _____ ☐ Other _____

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

☐ Manager Name: Donald Hobby, Jr.

☒ Member Address: 400 Bourland Rd., #1024

☐ Authorized Keller, TX 76248

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: Keith Mahar

☒ Member Address: 4017 Flamingo Drive

☐ Authorized El Paso, TX 79902

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: Dwight Stuckey

☒ Member Address: 25 Eddleston Ct.

☐ Authorized Lake St. Louis, MO 63367

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

Thomas E. Gibbs

Typed or printed name of signee

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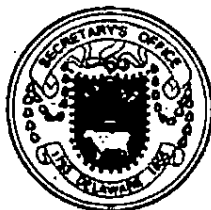
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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BRIDGENET INSURANCE AGENCY, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTEENTH DAY OF JULY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BRIDGENET INSURANCE AGENCY, LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF FEBRUARY, A.D. 2018.

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



6767743 8300

SR# 20195966729

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

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

Authentication: 203214613

Date: 07-15-19