Division of Corporations



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Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (614)280-3338 r : (954)208-0845 Fax Number

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Email Address:

Foreign Limited Liability Company FETCH INSURANCE SERVICES LLC

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

(Name of Foreign Limited Hability Company; must include "Limited Hability Company," "L.L.C.," or "IT.C.") frame unavailable, enter sitemate name adopted for the purpose of transacting Susiness in Florida. The alternate same must include "Limited Hability Company," "L.L.C. DELAWARE (Individuebna under the Saw of which foreign it metal liability company as organized) (Pole first transacted business in Florida, If prior to registralian.) (See sentions 683.0794' & 603.0903, F.S. to determine possibly liability) 3805 WEST CHESTER PIKE, STE 240 (Succi Address of Fracipal Office) NEWTOWN SQUARE, PA 19073 NEWTOWN SQUARE, PA 19073 NEWTOWN SQUARE, PA 19073 NewTown Square, PA 19073 NewTown Square, PA 19073	3. (FFI number, if applies ble) an Florids. If prior to registration.) 50905, F.S. in determine possibly liability) 6. (Mailing Address) NEWTOWN SQUARE, PA 19073		SERVICES, LLC		
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Office Address:			C T Corporation System	NOT acceptable)	
Plantation 33374		Name:		NOT acceptable)	
, Florida	33374	Name:	C T Corporation System 1200 South Pine Island Road	NOT acceptable)	
	33324 , Florida	Name:	C T Corporation System 1200 South Pine Island Road Plantation	33324	
		Name:	C T Corporation System	NOT acceptable)	
	33324 , Florida	Name:	C T Corporation System 1200 South Pine Island Road Plantation	33324	
(C.ty) (Zip code)	(C.ty) , Florida (Zip code)	Name:	C T Corporation System 1200 South Pine Island Road Plantation	33324	
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stered agent's acceptance: ng been named as registered agent and to accept service of process for the above stated limited liability compun mated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity.	(C.ty) (Zip code) ept service of process for the above stated limited liability company at the property in the property in the company at the proposition of the process for the above stated limited liability company at the proposition of the compacity. If we have a service of the code is the code of the	Name: Office Address: stered agent's acceping been named as re	C T Corporation System 1200 South Pine Island Road Plantation (C.ty) Stance: agistered agent and to accept service of pation, I hereby accept the appointment as	33324 Florida (Lip code) rocess for the above stated limited liability company of registered agent and agree to act in this capacity.	t the further
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Margaret E. Routzahn Assistant Vice President

Title or Capacity;	Name and Address:	Title or Capacit	<u>v:</u>	Nàmé and Add	ress;
Manager	Name:	Manager	Name:		
Member	Address: FETCH, INC.	Member	Address:		
Authorized	3800 West Chester Pike, Ste 240	Authorized			
Person	Newtown Square, PA 19073	Person			
Other	Other	Other		Other	
□Manager	Name: Paul Guyardo	Manager	Name:		
☐ Me mber	Address: 74 Essex Road	Member	Address:		
⊠Authorized	Summit, NJ 07901	☐ Authorized			
Person		Person			
Other		Olher		. Other	
	News		N		70701
Manager	Name:	Manager			-
Member 	Address:	Member	Address: _		
Authorized		☐ Authorized			
Person		Person			
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indexed individuals 9. Attached is a certifurisdiction under the franslator mus 10. This document is	s executed in accordance with section 605.02 nent to the Department of State constitutes a	Florida Department of Sta d, duly authenticated by the cate is in a foreign language 203 (1) (b), Florida Statute	ite Annual Rep ne official havi ge, a translation es, I am aware t	ort form. ng custody of recore of the certificate u that any false inform	ds in the

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "FETCH INSURANCE SERVICES, 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 ELEVENTH DAY OF FEBRUARY, A.D. 2020.

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

2020 12:3 - 2 | 65 10:32



Authentication: 202364563

Date: 02-11-20

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