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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 5, 2020

SUSAN WATSON 699 HAMPSHIRE RD. SUITE 215 WESTLAKE VILLAGE, CA 91361

SUBJECT: ASCENDANT NATIONAL TITLE, LLC

Ref. Number: W20000113814

We have received your document for ASCENDANT NATIONAL TITLE, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Yvette Scott Document Specialist II

Letter Number: 320A00019206

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COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	Ascendant National Title, LLC		
	Name	of Limited Liability Company	
The er Existe	nclosed "Application by Foreign Limited Liability Conce, and check are submitted to register the above re	Company for Authorization to Transact Business in eferenced foreign limited liability company to trans	Florida," Certificate o act business in Florida
Please	return all correspondence concerning this matter to	the following:	
	Susan Watson		
		Name of Person	2020
	Relaw, APC	; ;	2920 OCT
		Firm/Company	11.E
	699 Hampshire Rd., Suite 215		
		Address	L: 06
	Westlake Village, CA 91361		10 F
	Ci	ty/State and Zip Code	
	susan@relawapc.com		
	E-mail address: (to be	used for future annual report notification)	
For fu	erther information concerning this matter, please call	l:	
	Susan Watson	805 265-1031 at ()	
	Name of Contact Person	Area Code Daytime Telephone No	umber
	Mailing Address:	Street Address:	
Registration Section		Registration Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327		The Centre of Tallahassee	
	Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tailahassee, FL 32303		
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEP, S125.00 Filing Fee S130.00 Filing Fee Certificate of	e & 🔲 \$155.00 Filing Fee & 🗀 \$160.00 Fil	ing Fee, Certificate as & 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 HABILITY COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Ascendant National Ti	tle, LLC Limited Liability Company; must include "Limited	Lockillan Comment of the lockillan	16%	
(Aunte of Foreign	Emitted Clabitity Company, mast include: Climited	Liability Company. L.L.C., or "L	,LC . ")	
if name unavailable, enter alternate	name adopted for the purpose of transacting business in Flor	ida. The alternate name must include "Li	mited Liability Company" "Lil	. C," or "LLC,")
Texas		85-0765103 3.	1007	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(Jurisdiction under the law of w	hich füreign limited liability company is organized)	J	El number, if applicable	177
<u></u> -			Mag R	
	(Date first transacted business in Florida, if prior to re (See sections 605,0904 & 605,0905, F.S. to determine	gistration.) penalty liability)	FILOR 1: 06	Manage
10340 Brookhollow C	ircle	2400 Dallas Parkway.	Suite 560 Fin	
reet Address of Principal Office)		6. (Mailing Address)		
Highlands Ranch, CO	80129	Plano, TX 75093		
Name and <u>street address</u> Name:	National Registered Agents, Inc.	NOT acceptable)		
Office Address:	1200 South Pine Island Road	·		
	Plantation	33324 , Florida		
	(City)	, Florida	odel	
signatea in this applical comply with the provisi	tance: gistered agent and to accept service of pro tion, I hereby accept the appointment as r ons of all statutes relative to the proper at s of my position as registered agent.	egistered agent and agree to nd complete performunce of	act in this capacity. my duties, and I am J	I further an
	(Registered agent's sign	Scott White, Assista	nt Secretary	

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:	Title or Capacity:		Name and Address:
■Manager	Name: William C. Shaddock	□Manager	Name:	
□Member	Address: 2400 Dallas Parkway	□Member	Address:	
□Authorized	Suite 560	□Authorized		
Person	Plano, TX 75093	Person		
□Other		□Other		Others
				OCT THE
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	P. F. C.
□Authorized		□Authorized		NE 06
Person		Person		
□Other	Other	□Other		□ Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person		Person		
Other	Other	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

Jennifer Felten, Esq.

Typed or printed name of signee

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Ruth R. Hughs Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Ascendant National Title, LLC (file number 803592909), a Domestic Limited Liability Company (LLC), was filed in this office on April 14, 2020.

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 July 29, 2020.



Phone: (512) 463-5555

Prepared by: SOS-WEB

Ruth R. Hughs Secretary of State

Document: 0863

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