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APPROVED



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. . .

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 620070 4375305

AUTHORIZATION :

COST LIMIT

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_ _ _ _ _ _ _ _ _

- ORDER DATE : April 13, 2022
- ORDER TIME : 8:57 AM

- ORDER NO. : 620070-015
- CUSTOMER NO: 4375305

:

FOREIGN FILINGS

NAME: BROKERS INTERNATIONAL, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY XX PLAIN STAMPED COPY _____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER:

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Brokers International, I				
(Name of Foreign	Limited Liability Company; must include "Limited	I Liability Con	pany, "LLC," or "LLC.")	
If name unavailable, enter alternate i	name adopted for the purpose of transacting business in Fl	orida. The alterna	te name must include "Limited Liabil	lity Company," "L.L.C." or "I.I.C.")
Delaware		42-	1427068	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	3(FEI number, if applicable)		if applicable)
Upon filing				
·	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determi	registration) ne penalty liabili	y)	_
	Drive, Urbandale, IA 50322		5 NW Urbandale Drive, U	
treet Address of Principal Office)			(Mailing Address)	
				· ~ ~
				FI 2022 APR 1
				IPR
. Name and street addres	is of Florida registered agent: (P.O. Box	<u>NOT</u> accer	nable)	
	Corporation Service Company			
Name:			-	9
Office Address:	1201 Hays Street		_	
	Tallahassee		32301 , Florida	
	(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.

(Registered agent's signature) ADT. YP.

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: Eric E. Pederson	∎Manager	Name: Bryan A. Adams
□Member	Address: 1445 Ross Ave., Floor 22	□Member	Address:
□Authorized	Dallas. TX 75202	□Authorized	Dallas, TX 75202
Person		Person	
□Other	Other	□Other	Other
Manager	Name:	□Manager	Name: <u>Mark W. Williams</u>
□Member	Address:	□Member	Address:
Authorized	Dallas, TX 75202	Authorized	Urbandale, IA 50322
Person		Person	
□Other	Other	Other	Other
□Manager	American Independent Name: <u>Marketing, LLC</u>	□Manager	Name:
Member	Address:	□Member	Address:
□Authorized	Yakima, WA 998902	□Authorized	
Person		Person	
Other	Other	Other	Other

<u>Important Notice</u>: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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.

DocuSigned by: Mark W Williams - E53854EBF3474CE

Signature of an authorized person

Mark W. Williams, Authorized Person

Typed or printed name of signee

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BROKERS INTERNATIONAL, 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 THIRTEENTH DAY OF APRIL, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BROKERS INTERNATIONAL, LLC" WAS FORMED ON THE THIRD DAY OF JUNE, A.D. 2021.

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



Authentication: 203174062 Date: 04-13-22

Page 1

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