

M23000006752

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

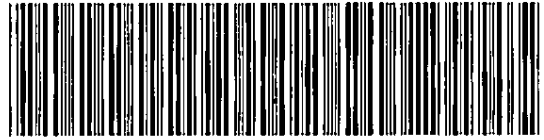
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600408359306

CHARTER FILING - 11:00 AM

FILED
2023 MAY 11 PM 1:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Property Insight, 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:

Madeline G. M. Lovejoy

Name of Person

Fidelity National Financial, Inc.

Firm/Company

3210 El Camino Real Ste 200

Address

Irvine, CA 92602

City/State and Zip Code

madeline.gm.lovejoy@fnf.com

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

For further information concerning this matter, please call:

Madeline G. M. Lovejoy

949

255-9033

at (_____) _____

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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. Property Insight, 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. 61-2058376
(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. 601 Riverside Ave 6. 3210 El Camino Real Ste 200
(Street Address of Principal Office) (Mailing Address)

Jacksonville, FL 32204 C/O MGM Lovejoy

Irvine, CA 92602

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


Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, FL 33324
(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)

By: Terrie Bates, Asst. Secy.

FILED
2023 MAY 11 PM 1:02
CLERK OF STATE
JACKSONVILLE, FLORIDA

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: Rocky Mountain Support Services

☒ Member Address: 601 Riverside Ave

☐ Authorized Jacksonville, FL 32204

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: Marjorie Nemzura

☐ Member Address: 10 S La Salle St Ste 3100

☐ Authorized Chicago, IL 60603

Person _____

☒ Other Vice President ☒ Other Corp Secretary

☐ Manager Name: Madeline G. M. Lovejoy

☐ Member Address: 3210 El Camino Real Ste 200

☐ Authorized Irvine, CA 92602

Person _____

☒ Other Asst Vice Pres ☒ Other Asst Secretary

Title or Capacity: Name and Address:

☐ Manager Name: Nicole R. Bell

☐ Member Address: 601 Riverside Ave

☐ Authorized Jacksonville, FL 32204

Person _____

☒ Other President ☐ Other _____

☐ Manager Name: Marilyn C. N. Supalo

☐ Member Address: 1701 Village Center Circle

☐ Authorized Las Vegas, NV 89134

Person _____

☒ Other Vice President ☒ Other Asst Treasurer

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____


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

Marjorie Nemzura Vice President and Corporate Secretary

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 "PROPERTY INSIGHT, 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 FIRST DAY OF MAY, A.D. 2023.

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



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.

7132829 8300

SR# 20231728713

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

Authentication: 203249239

Date: 05-01-23