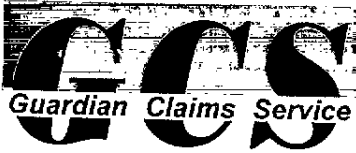


MA9000002079



425 E. Colorado St., Suite 500  
Glendale, CA 91205

Phone #

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- |                                   |   |  |
|-----------------------------------|---|--|
| <input type="checkbox"/> Walk in  | <input type="checkbox"/> Pick up time _____ | <input type="checkbox"/> Certified Copy        |
| <input type="checkbox"/> Mail out | <input type="checkbox"/> Will wait          | <input type="checkbox"/> Photocopy             |
|                                   |   | <input type="checkbox"/> Certificate of Status |

**NEW FILINGS**

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

**OTHER FILINGS**

- ☐ Annual Report
- ☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

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-12/22/99--01041--008  
\*\*\*125.00 \*\*\*125.00

APPROVED  
AND  
FILED  
99 DEC 22 PM 9:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Examiner's Initials *BB*

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. Guardian Claims Service, LLC  
(Name of foreign limited liability company)
2. California 3. 95-4689512  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. May 8, 1998 5. Perpetual  
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. Planned for year 2000  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 425 E. Colorado Street, Suite 500  
Glendale, CA 91205  
(Street address of principal office)

8. If limited liability company is a manager-managed company, check here ☒

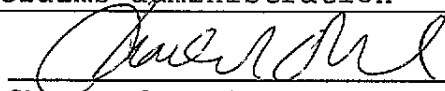
9. The usual business addresses of the managing members or managers are as follows:

David G. Morse	425 E. Colorado St., Suite 500, Glendale, CA	91205
Thomas J. Reitze	425 E. Colorado St., Suite 500, Glendale, CA	91205
Charles N. Ohl	425 E. Colorado St., Suite 500, Glendale, CA	91205
Richard Acunto	6320 Sunset Blvd., 2nd Floor, Hollywood, CA	90028
Susan McFarlane	6320 Sunset Blvd., 2nd Floor, Hollywood, CA	90028

10. Attached is an original 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. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: \_\_\_\_\_

Insurance claims administration



Signature of a member or an authorized representative of a member.  
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Charles N. Ohl

Typed or printed name of signee

APPROVED  
AND  
FILED  
59 DEC 22 AM 9:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES,  
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING  
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE  
STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Guardian Claims Service, LLC

2. The name and the Florida street address of the registered agent and office are:

Ralph Adams

(Name)

5420 Bay Center Drive, Suite 203

Florida street address (P.O. Box NOT ACCEPTABLE)

Tampa, FL 33609

City/State/Zip

*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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..*

Ralph Adams

(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

93 DEC 22 AM 9:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

# State of California

SECRETARY OF STATE

## CERTIFICATE OF STATUS CALIFORNIA LIMITED LIABILITY COMPANY

*I, BILL JONES, Secretary of State of the State of California, hereby certify:*

*That on the 8th day of May, 1998, GUARDIAN CLAIMS SERVICE, LLC, became recognized under the laws of the State of California by filing its Articles of Organization in this office; and*

*That no record exists in this office of a certificate of cancellation of said limited liability company nor of a court declaring cancellation thereof; and*

*That according to the records of this office, the said limited liability company is authorized to exercise all its powers, rights and privileges and is in good legal standing in the State of California; and*

*That no information is available in this office on the financial condition of this limited liability company.*

IN WITNESS WHEREOF, I execute  
this certificate and affix the Great  
Seal of the State of California this  
9th day of December, 1999.

*Bill Jones*  
BILL JONES  
Secretary of State

