

State of Idaho

Office of the Secretary of State

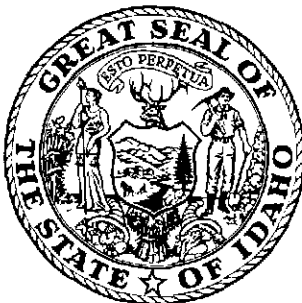
**CERTIFICATE OF REGISTRATION
OF
ASSURED PARTNERS OF FLORIDA, LLC**

File Number W 164919

I, LAWERENCE DENNEY, Secretary of State of the State of Idaho, hereby certify that an application for Foreign Registration Statement, duly executed pursuant to the provisions of the Idaho Uniform Business Organization Code, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Registration to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: April 8, 2016



Lawrence Denney
SECRETARY OF STATE

By *[Signature]*



FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the form in duplicate.

2016 APR -8 AM 8:54
SECRETARY OF STATE
STATE OF IDAHO

1. The name of the entity is: AssuredPartners of Florida, LLC
2. The name which it shall use in Idaho is: _____
(Enter a name here, only if you are required to adopt an alternate name)
3. Select the type of entity you wish to register:

<input type="checkbox"/> Business Corporation	<input type="checkbox"/> General Partnership
<input type="checkbox"/> Nonprofit Corporation	<input type="checkbox"/> General Cooperative Association
<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Limited Partnership (Including a limited liability limited partnership)
<input checked="" type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Statutory Trust, Business Trust, or Common-law Business Trust
- ☐ Other: _____
(Use "Other" only if your foreign entity type is not listed above, and enter the type here.)
4. Jurisdiction of formation: Florida
(Provide the domestic jurisdiction where the entity was formed)
5. The address of its principal office is:
6609 Willow Park Dr., Ste 201
(Street Address)
Naples, FL 34109
(Mailing Address, if different)
6. The address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:
6609 Willow Park Dr., Ste 201
(Street Address)
Naples, FL 34109
(Mailing Address, if different)
7. The mailing address to which correspondence should be addressed, if different from item 5, is:
c/o Herbert L. Jamison & Co., LLC 20 Commerce Dr., Suite 200 Cranford, NJ 07016
(Address)
8. The name of the registered agent and street address of registered agent in Idaho:
Corporation Service Company, 12550 W. Explorer Drive, Suite 100, Boise, ID 83713
(Name) (Address)
9. The name, capacity, and mailing address of at least one governor:

<u>Jim W Henderson</u>	<u>Manager</u>	<u>200 Colonial Center Pkwy Ste 150 Lake Mary, FL 32746</u>
(Name)	(Capacity)	(Address)
<u>Thomas E Riley</u>	<u>Manager</u>	<u>200 Colonial Center Pkwy Ste. 150 Lake Mary, FL 32746</u>
(Name)	(Capacity)	(Address)

Signature: _____

Typed Name: Dean Curtis

Capacity: SVP

Secretary of State use only

IDAHO SECRETARY OF STATE

04/08/2016 05:00

CK:26429 CT:248874 BH:1522731
1@ 100.00 = 100.00 FOR REG ST #2

W164919

State of Florida

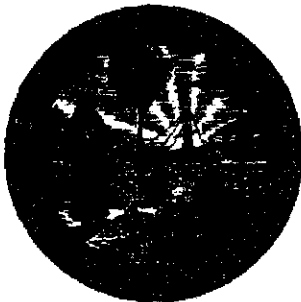
Department of State

I certify from the records of this office that ASSUREDPARTNERS OF FLORIDA, LLC is a limited liability company organized under the laws of the State of Florida, filed on February 17, 2012.

The document number of this limited liability company is L12000024743.

I further certify that said limited liability company has paid all fees due this office through December 31, 2016, that its most recent annual report was filed on January 27, 2016, and that its status is active.

*Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this
the Thirty-first day of March, 2016*



Ken Datzner
Secretary of State

Tracking Number: CU5271883692

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

<https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication>