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State of Rhode Island and Providence Plantations Department of State - Business Services Division

Application for Registration

FOREIGN Limited Liability Company

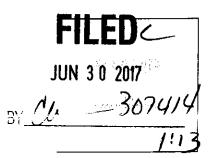
→ Filing Fee: \$150.00

R.I. DEPT. OF STATE BUS SVCS DIV

Pursuant to the provisions of RIGL <u>7-16-49</u>, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement:

1. The name of the limited liability company is:		
Apex Insurance Agency, LLC		
Is this company organized in its state or country of formati	ion as a low-profit limited liabi	lity company? Yes No X
The name, if different, under which it proposes to register and	d transact business in Rhode	Island is:
		······································
2. The LLC is organized under the laws of: Virginia		, , , , , , , , , , , , , , , , , , ,
3. The date of its organization is: 12/30/2016		
And the period of its duration is: CHECK ONLY ONE BOX	,	
X Perpetual (on-going)		
Date certain for dissolution		
4. The name and address of the resident agent/office in Rhod	le Island is:	
Agent Name C T Corporation System		
Street Address (NOT a P.O. Box) 450 Veterans Memorial Parkw	/ay, Suite 7A	<u> </u>
City/Town East Providence	State RHODE ISLAND	Zip Code 02914
5. The Department of State is appointed the agent of the foreig time there is no resident agent or if the resident agent cannot diligence.		
6. The address of any office required to be maintained in the s liability company is organized is:	state or other jurisdiction unde	r the laws of which the limited
201 Concourse Blvd. Suite 260 Glen Allen, VA 23060		

MAIL TO: Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040 Website: www.sos.ri.gov



FORM 450 - Revised: 08/2016

220 S. Ridgewood Ave. Daytona Beach, FL 32114		
8. Management of the Limited Liability Company:		
The limited liability company is managed:		
By its members (If you have checked	I this box, go to Section 9. (DO NOT fill out the chart below.)	
X By one (1) or more managers (List m	anagers below)	
MANAGER	ADDRESS	
Anthony Strianese	220 S. Ridgewood Ave. Daytona Beach, FL 32114	
9. This application is accompanied by a Certificate of Good Standing/Letter of Status issued by the proper officer of the state or country under the laws of which it is formed that is dated within 60 days of the filing of this document.		
10. Date when this application for Certificate of Registration will be effective: CHECK ONLY ONE BOX		
X Date received (Upon filing)		
Later effective date (Date must be no more than 30 days from the day of filing)		
Under penalty of perjury, I declare and affi accompanying attachments, and that all su	irm that I have examined this Application for Registration, including any tatements contained herein are true and correct.	
Type or Print Name of LLC	Date / /	
Apex Insurance Agency, LLC	6/20/17	
Signature of Anthonized Person	SIGN DOCUMENT HERE	

7. The mailing address for the limited liability company is:

If pu have any questions, please call us at (401) 222-3040, Monday through Friday, beween 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

Commonwealth Hirginia



State Corporation Commission

CERTIFICATE OF FACT

I Certify the Following from the Records of the Commission:

That Apex Insurance Agency, LLC is duly organized as a limited liability company under the law of the Commonwealth of Virginia;

That the date of its organization is December 30, 2016; and

That the limited liability company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date: June 23, 2017

Joel H. Peck, Clerk of the Commission

CISECOM Document Control Number: 1706236304



State of Rhode Island and Providence Plantations **Department of State** | **Office of the Secretary of State Nellie M. Gorbea**, Secretary of State

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island

and Providence Plantations, hereby certify that this document, duly executed in

accordance with the provisions of Title 7 of the General Laws of Rhode Island, as

amended, has been filed in this office on this day:

June 30, 2017 01:13 PM

Tulli U. Kole

Nellie M. Gorbea Secretary of State

