

Filing Fee: \$1000.00

ID Number: _____



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

2009 OCT 19 AM 10:07

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV

LIMITED LIABILITY PARTNERSHIP

**NOTICE OF
FOREIGN REGISTERED LIMITED LIABILITY PARTNERSHIP**

Pursuant to the provisions of Section 7-12-59 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign Registered Limited Liability Partnership hereby submits notice of its intent to transact business in the state of Rhode Island and for that purpose makes the following statement:

1. The name of the foreign Registered Limited Liability Partnership is:
Swantner & Gordon Insurance Agency, L.L.P.

(The name must include the words "registered limited liability partnership" or the abbreviation "L.L.P." or "LLP" or such other similar words or abbreviations as may be required or authorized by the laws of the state where the partnership is registered, as the last words or letters of its name.)

2. The jurisdiction, the laws of which govern its partnership agreement and under which it is registered as a Limited Liability Partnership, is:
Texas

3. The address of its principal office is:
500 N. Shoreline, Suite 1200
Corpus Christi, TX 78471

4. If the partnership's principal office is not located in this state, the address of a registered office and the name and address of a registered agent for service of process in the state of Rhode Island which the partnership shall be required to maintain:
CT Corporation System
155 South Main Street, Suite 301, Providence, RI 02903

5. The names and addresses of all resident partners in this state:

<u>Name</u>	<u>Residence Address</u>
_____	_____
_____	_____
_____	_____
_____	_____

(If more space is required, please list on separate attachment)

10:07

FILED

OCT 19 2009

By J.B. 101521

6. A brief statement of the business in which the partnership is engaged:

Sale and service of insurance

7. Any other information that the partnership determines to include:

8. The partnership is a Registered Limited Liability Partnership.

Under penalty of perjury, I/we declare and affirm that I/we have examined this Notice of Foreign Registered Limited Liability Partnership, including any accompanying attachments, and that all statements contained herein are true and correct.

Date: 8/24/09

Swantner & Gordon Insurance Agency, L.L.P.

Print Exact Name of Registered Limited Liability Partnership

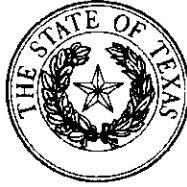
By:  Randal M. Lee, Managing Partner

By:  James Steven Addkison, Partner

By: _____

By: _____

Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697



Hope Andrade
Secretary of State

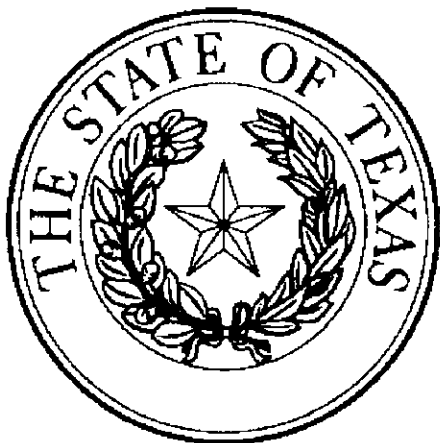
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate Of Registration for SWANTNER & GORDON INSURANCE AGENCY, L.L.P. (file number 500404724), a Domestic Limited Liability Partnership (LLP), was filed in this office on September 21, 1998.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on September 02, 2009.



A handwritten signature in black ink, appearing to read "Hope Andrade".

Hope Andrade
Secretary of State



State of Rhode Island and Providence Plantations

A. Ralph Mollis

Secretary of State

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, 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:

A handwritten signature in black ink that reads "A. Ralph Mollis".

A. RALPH MOLLIS

Secretary of State

