

DATE: 02/03/2004

DOCUMENT ID DESCRIPTION MERGER/DOMESTIC (MER)

PENALTY

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Receipt

This is not a bill. Please do not remit payment.

C.T. CORPORATION SYSTEM 17 S. HIGH STREET JAMES TANKS III COLUMBUS, OH 43215

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, J. Kenneth Blackwell

956516

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

ADVANCED SETTLEMENTS, INC.

and, that said business records show the filing and recording of:

Document(s)

MERGER/DOMESTIC

Document No(s):

200403400100



United States of America State of Ohio Office of the Secretary of State

Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 2nd day of February, A.D.

Quette Backmell

Ohio Secretary of State

DATE: 02/03/2004 DOCUMENT ID DESCRIPTION MERGED OUT OF EXISTENCE (MEX)

FILING

EXPED PENALTY

CERT

COPY

Receipt

This is not a bill. Please do not remit payment.

C.T. CORPORATION SYSTEM 17 S. HIGH STREET JAMES TANKS III COLUMBUS, OH 43215

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, J. Kenneth Blackwell

1278243

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

ADVANCED SETTLEMENTS, LLC

and, that said business records show the filing and recording of:

Document(s)

MERGED OUT OF EXISTENCE

Document No(s):

200403400100



United States of America State of Ohio Office of the Secretary of State Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 2nd day of February, A.D. 2004.

Ohio Secretary of State

FEB-02-2004 12:13

CT CORP

212 8948790

4.02



Prescribed by J. Kenneth Blackwell

Ohio Secretary of State
Central Ohio: (614) 466-3910
Toll Free: 1-877-SOS-FILE (1-877-767-3453)

Expedite this Form: (Select One)					
Mail Forn	to one of the Following:				
	PO Box 1390				

Columbus, OH 43216
"Requires an additional fee of \$100 "

O No PO Box 1329 Columbus, OH 43216

www.state.oh.us/sos e-mail: busserv@sos.state.oh.us

* CERTIFICATE OF MERGER

(For Domestic or Foreign, Profit or Non-Profit)
Filing Fee \$125.00
(154-MER)

In accordance with the requirements of Ohio law, the undersigned corporations, banks, savings banks, savings and loan, limited liability companies, firnited partnerships and/or partnerships with limited liability, desiring to effect a merger, set forth the following facts:

NFP Resources III Insurance Agency, Inc.		
Name Change: As a result of this merger, the name of the surviving entity has been changed to Advanced Settlements, Inc.	o the following:	
(Complete only if name of surviving entity is changing through the inergor) The surviving entity is a: (Please check the appropriate box and fill in the appropriate bl.)	anks)	
€1Domestic (Ohio) For-Profit Corporation, charter number 956516	·,	
Domestic (Ohio) Non-Profit Corporation, charter number		
Foreign (Non-Ohio) Corporation incorporated under the laws of the state/country of and licensed to transact business in the State of Ohio under license number		
Foreign (Non-Ohio) Corporation incorporated under the laws of the state/country of and NOT licensed to transact business in the state of Ohio,		
Domestic (Ohio) Limited Liability Company, with registration number		
Foreign (Non-Ohio) Limited Liability Company organized under the laws of the state/country of and registered to do business in the State of Ohio under registration number		~ ~ ~ ~
Foreign (Non-Ohio) Limited Liability Company organized under the laws of the state/country of and NOT registered to do business in the State of Ohio.		
Domestic (Ohio) Limited Partnership, with registration number	1.	,

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			ed under the laws of the state/cou	ntry of	_
	-	red to do business in the state o			
	☐ Domestic (Ohio) Partnership having limited li	ability, with the registration num	ber	_
	☐ Foreign (Non-O		d liability organized under the la		
		and registered to d	o business in the state of Ohio	under registration number	
	T Foreign (Non-Oh	io) Non-Profit incorporation und	er the laws of the state/county of		
		ransact business in the state of			-
	_ • •	io) Non-Profit incorporation und to transact business in the state	er the laws of the state/county of e of Ohio.		
	General partner	ship not registered with the st	tate of Ohio		
Th re al	spectively, of which is merging entities, ple				
·			State/Country of Organ	ization Type of Entity	
		s. LLC / 1278243			
	avanced Settlement	s. 135C/10/10095	Florida	LLC	_
					
					_
Th	ERGER AGREEMEN' te name and mailing a treement of merger up	ddress of the person or entity	from whom/which eligible person		
	chael Goldman		c/o NFP, 787 Seventh A	Addresses are NOT acceptable.	
•	ew York			019	
	y, village or township)		(state)	(zip code)	
Th aft		ctive on:	(if a date is specified, the date cannot be earlier than the date the merger).		
Th Th of	is merger was adopte	country under which each cold, approved and authorized bit is organized, and the perso	nstituent entity exists, permits the yeach of the constituent entities as signing this certificate on being the control of the	s in compliance with the laws	
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P.04

VI. STATUTORY AGEN	·	
		entity's statutory agent upon whom any process, notice or demand may be
served is:		many of decision, again aport thom any process, modes of demand may be
C T Corporatio	n System	1300 9th Street
(name)	:	(street) NOTE: P.O. Box Addresses are NOT acceptable.
Cleveland		Ohio 44114
(This item MUST be compauthorized to conduct bus	(city, village or township pleted if the survivin iness in the state of	ng entity is a foreign entity which is not licensed, registered or otherwise
VII. ACCEPTANCE OF A The undersigned, nan acknowledges and ac	ned herein as the sta	tatutory agent for the above referenced surviving entity, hereby ent of statutory agent for said entity.
		Signature of Agent Mulicular
viii. STATEMENT OF MEI	ent differs in any wa RGER ^{::}	t by the surviving entities if through this merger the statutory agent has any from the name currently on record with the Secretary of State.) ecified herein, the merging entity/entities listed herein shall merge into the
IX. AMENDMENTS The articles of incorpor having limited liability (Add Attachments are p	circle appropriate te	ganization, certificate of limited partnership or registration of partnership erm) of the surviving domestic entity have been amended. No Changes
A. The listed surviving partnership, or par bank, savings bant limited liability, and	g foreign corporation tnership having limit k, savings and loan, hereby appoints the	DREIGN SURVIVING ENTITY n, bank, savings bank, savings and loan, limited liability company, limited ted liability desires to transact business in Ohio as a foreign corporation, limited liability company, limited partnership, or partnership having the following as its statutory agent upon whom process, notice or demand a state of Ohio. The name and complete address of the statutory agent
(лапте)		(street) NOTE: P.O. Box Addresses are NOT acceptable.
		Obje
(city, village or township		, Ohio(zip code)
statutory agent liste Secretary of State o limited liability comp agent when require liability company's.	or partnership havired above as long as of Ohio if the agent corany, limited partner, d to do so, or if the t	on, bank, savings bank, savings and foan, limited liability company, ng limited liability irrevocably consents to service of process on the the authority of the agent continues, and to service of process upon the cannot be found, if the corporation, bank, savings bank, savings and loan, rship, or partnership having limited liability fails to designate another foreign corporation's, bank's, savings bank's, savings and loan's, limited sor partnership having limited liability's license or registration to do

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	1. Fo	reign Notice Under Section	llows: (Complete only if applicable) 1703.031 n bank, savings bank, or savings an	id loan, then the followi	ng information	
	(a	The name of the Foreign Na association is	tionally/Federally chartered bank, sa	avings bank, or savings	s and loan	
	(b.	The name(s) of any Trade N	lame(s) under which the corporation	n will conduct business	:	
	(c.	The location of the main offic				
		(street address)	NOTE: P.O.	Box Addresses are NOT a	ecceptable.	
		(city, township, or village)	(county)	(state)	(zip code)	
	(d.	The principal office location i	n the state of Ohio shall be:			
		(street address)	NOTE: P.O.	Box Addresses are NOT a	cceptable.	
				Ohio		
		(city, township, or village)	(county)	(state)	(zip code)	
	(e.		the following purpose(s) in the state nary of the business to be conducte		not sufficient)	
	2. Fo	eign Qualifying Limited Liab	ollity Company	 		
			limited liability company, the follow	ing information must be	e completed.)	
	(a.	The name of the limited liabil	ity company in its state of organizat	ion/registration is		
	(b.	The name under which the li	miled liability company desires to tra	ansact business in Ohi	o is	
	(c.	The limited liability company under the laws of the state/or	was organized or registered on ountry of			
OHION - GELMIZ C'T Syste	in Oilline					
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	(d.)	The address to which interested persoperating agreement, bylaws, or other			of organization,	
		(street address)	NOTE: P.O. B	ox Addresses are NOT	acceptable.	
		(city, township, or village)		(state)	(zip code)	
		eign Qualifying Limited Partnership ne qualifying entity is a foreign limited		ormation must be con	mpteted).	
	(a.)	The name of the limited partnership is				
	(b.)	The limited partnership was formed o	n			
	(c.)	The address of the office of the limite	d partnership in its state/cou	intry of organization i	s;	
		(street address)	NOTE: P.O. Bo	ox Addresses are NOT a	acceptable.	
		(city, township, or village)	(county)	(state)	(zip code)	
	(đ.)	The limited partnership's principal offi	ce address is:			
		(street address)	NOTE; P.O. Bo	ox Addresses are NOT a	acceptable.	
		(city, township, or viflage)	(county)	(state)	(zip code)	
	(e.)	The names and business or residence follows:	e addresses of the General	partners of the partne	ership are as	
		Name	Address			
			· · · · · · · · · · · · · · · · · · ·			
	(If insuffici	ent space to cover this item, please attach a se	parate sheet listing the general pa	rtners and their respective	a addresses)	
	(f.)	The address of the office where a list limited partners and their respective c			es of the	
		(street address)	NOTE: P.O. Bo	NOTE: P.O. Box Addresses are NOT acceptable.		
		(city, lownship, or village)	(county)	(state)	(zip code)	
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		tnership hereby certifies th ship in Ohio is canceled or		cords until the registrati	on of the	
	4. Foreign Qualit	fying Partnership Having	Limited Liability			
	(a.) The name	of the partnership shall be				
	(b.) Please cor	mplete the following approp	oriate section (either item t	x(I) or b(2)):		
	(1.) The a	ddress of the partnership's	principal office in Ohio is:			
	(street address	35)	NOTE: P.O.	Box Addresses are NOT a	cceptable.	
	(aty, village o	r township)		, Ohio(zip cool	e)	
		ship does not have a prin			ompleted)	
	(2.) The ad	ddress of the partnership's	principal office (Non-Ohio):		
	(street addres	s)	NOTE: P.O.	Box Addresses are NOT a	cceptable.	
	(city, township	o, or village)		(state)	(zip code)	
	(c.) The name :	and address of a statutory	agent for service of proces	ss in Ohio is as follows:		
	(name)					
	(street address	s)	NOTE: P.O. I	Box Addresses are NOT ac	captable.	
	(city, village or	township)	, Ohio	(zip code)		
	(d.) Please indic formed	cate the state or jurisdiction	in which the Foreign Limi	ted Liability Partnership	has been	
	(e.) The busines	ss which the partnership en	igages in is:			
					· · · · · · · · · · · · · · · · · · ·	
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The undersigned constituent entities have caused this certificate of merger to be signed by its duly
authorized officers, partners and representatives on the date(s) stated below.

Advanced Settlements, LLC	NFP Resources III Insurance Agency, Inc.
(Exact name of entity)	(Exact name of entity)
Law of the L	ву:
By: pleaser 1. M. Meny	By:
100 22.75 Al 11.0	Douglas W. Hammond
	Its: Vice President and Secretary
Date: 1/18/04	Date: 1/30/12
•	'
(Exact name of entity)	(Exact name of entity)
. .	_
Ву:	Ву:
lts:	its:
Date:	Date:
,	
	
(Exact name of entity)	(Exact name of entity)
Ву:	Ву:
lts:	Its:
Date:	Date:

(Exact name of entity)

Date:

(Exact name of entity)

Date:

Date:

(Exact name of entity)

Date:

Date:

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P.09

Attachment to Certificate of Merger of Advanced Settlements, LLC with and into NFP Resources III Insurance Agency, Inc.

IX AMENDMENTS – Article I of the Articles of Incorporation of the surviving entity have been amended in its entirety as follows:

"The name of the Corporation is Advanced Settlements, Inc."

[00020920.DOC;]

TOTAL P.09