

**F03000001845**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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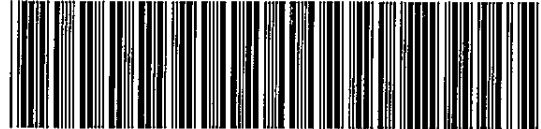
(Business Entity Name)

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ACCOUNT NO. : 072100000032  
REFERENCE : 018634 7363511  
AUTHORIZATION :  
COST LIMIT : \$ 70.00 *Patricia Pujols*

ORDER DATE : April 10, 2003  
ORDER TIME : 10:05 AM  
ORDER NO. : 018634-020  
CUSTOMER NO: 7363511  
CUSTOMER: Jennifer Hayes  
Brown & Brown Insurance, Inc.  
Suite 1700  
401 E. Jackson Street  
Tampa, FL 33602

FOREIGN FILINGS

NAME: BROWN & BROWN INSURANCE OF  
GEORGIA, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 1156

EXAMINER: \_\_\_\_\_

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

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1. Brown & Brown Insurance of Georgia, Inc.  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Georgia 3. 58-0840189  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. November 23, 1960 5. perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. upon qualification  
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 605 E. First Street, Rome, GA 30161  
(Principal office address)

\_\_\_\_\_  
(Current mailing address)

8. Insurance agent/broker  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301  
(City) (Zip code)

10. Registered agent's acceptance:  
*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

Corporation Service Company  
Deborah D Skipper  
(Registered agent's signature) Deborah D. Skipper  
Asst. V. Pres.

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: See attached officers/directors rider

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

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**B. OFFICERS**

President: See attached officers/directors rider

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Thomas M. Donegan, Jr.  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Thomas M. Donegan, Jr., Vice President  
(Typed or printed name and capacity of person signing application)

## OFFICERS/DIRECTORS RIDER

AL-Application for Certificate of Authority

Brown & Brown Insurance of Georgia, Inc.

### List of Officers

**Name:** J. Hyatt Brown **Title:** Chairman  
**Bus. Addr.:** c/o Brown & Brown, Inc. 220 S. Ridgewood Ave., Daytona Beach, FL 32114

**Name:** Cory T. Walker **Title:** Treasurer  
**Bus. Addr.:** c/o Brown & Brown, Inc. 220 S. Ridgewood Ave., Daytona Beach, FL 32114

**Name:** Laurel L. Grammig **Title:** Vice President/Secretary  
**Bus. Addr.:** c/o Brown & Brown, Inc. 401 E. Jackson St., Ste. 1700, Tampa, FL 33602

**Name:** Thomas M. Donegan, Jr. **Title:** Vice President & Asst. Sec.  
**Bus. Addr.:** c/o Brown & Brown, Inc. 401 E. Jackson St., Ste. 1700, Tampa, FL 33602

**Name:** Gary Shertenlieb **Title:** Chief Executive Officer  
**Bus. Addr.:** c/o Brown & Brown Insurance of Georgia, Inc. 1117 Perimeter Center West, Ste. N-400, Atlanta, GA 30338

**Name:** A. Des Yawn **Title:** Sr. Executive Vice President  
**Bus. Addr.:** c/o Brown & Brown Insurance of Georgia, Inc. 1117 Perimeter Center West, Ste. N-400, Atlanta, GA 30338

**Name:** Blair Funderburk **Title:** Executive Vice President  
**Bus. Addr.:** c/o Brown & Brown Insurance of Georgia, Inc. 1117 Perimeter Center West, Ste. N-400, Atlanta, GA 30338

**Name:** James Dorsett **Title:** Executive Vice President  
**Bus. Addr.:** c/o Brown & Brown Insurance of Georgia, Inc. 1117 Perimeter Center West, Ste. N-400, Atlanta, GA 30338

**Name:** Julia McLaughlin **Title:** Assistant Vice President  
**Bus. Addr.:** c/o Brown & Brown Insurance of Georgia, Inc. 1117 Perimeter Center West, Ste. N-400, Atlanta, GA 30338

**Name:** Linda Slafta **Title:** Sr. VP & Operations Manager  
**Bus. Addr.:** c/o Brown & Brown Insurance of Georgia, Inc. 1117 Perimeter Center West, Ste. N-400, Atlanta, GA 30338

### List of Directors

**Name:** Laurel L. Grammig **Term:** Dec 31, 2004  
**Bus. Addr.:** c/o Brown & Brown, Inc. 401 E. Jackson St., Ste. 1700, Tampa, FL 33602

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**Secretary of State**  
**Corporations Division**  
**315 West Tower**  
**#2 Martin Luther King, Jr. Dr.**  
**Atlanta, Georgia 30334-1530**

CONTROL NUMBER : H106661  
DATE INC/AUTH/FILED: 11/23/1960  
JURISDICTION : GEORGIA  
PRINT DATE : 04/10/2003  
FORM NUMBER : 211

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CORPORATION SERVICE COMPANY  
S. PITTARD  
1201 HAYS STREET  
TALLAHASSEE, FL 32301

**CERTIFICATE OF EXISTENCE**

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that as of the above print date

**BROWN & BROWN INSURANCE OF GEORGIA, INC.**  
**A GEORGIA PROFIT CORPORATION**

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated.

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date and has not filed articles of dissolution, certificate of cancellation or any other similar document with the Office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the print date above. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This information is electronically transmitted, issued and certified in accordance with the Georgia Electronic Records and Signatures Act and Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

20030410143500174



*Cathy Cox*

Cathy Cox  
Secretary of State