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(Re	questor's Name)			
(Address)				
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(Cit	y/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Do	cument Number)			
Certified Copies	Certificates	of Status		
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SCORETARY OF STATE

WOB-56878

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COVER LETTER

TO:	New Filing Se Division of C			
SUBJ	ECT:	Starke A	gency, Inc.	
		(Name of corpo	ration - must include suffix	κ)
Dear S	Sir or Madam:			
"Certi		ation by Foreign Corporation nce," and check are submitted orida.		•
Please	return all corre	spondence concerning this ma	atter to the following:	
Gar	y T. Harkei	r, Esq.		
	u	(Nam	e of Person)	,
3H (Corporate :	Services, LLC		
		(Firm	/Company)	
6 Cl	ement Ave	nue	-	
		(/	Address)	
Sara	atoga Sprin	igs, NY 12866		
		(City/St	ate and Zip code)	
For fu	rther informatio	n concerning this matter, plea	se call:	
Gary	T. Harker	, Esq. at (51	8 ₎ 583 0639 Ex	t. 111
	(Name of Per	at \	ea Code & Daytime Telep	
	New Filing Se Division of Co Clifton Buildi	orporations ng ve Center Circle	MAILING A New Filing S Division of O P.O. Box 633 Tallahassee,	Section Corporations 27
Enclos	ed is a check fo	r the following amount:	,	
₹7 0.	.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy



December 29, 2008

GARY T HARKER, ESQ. 3H CORPORATE SERIVCES, LLC 6CLEMENT AVE SARATOGA SPRINGS, NY 12866

SUBJECT: STARKE AGENCY, INC. Ref. Number: W08000056878

We have received your document for STARKE AGENCY, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6931.

Letter Number: 808A00061799

Becky McKnight Regulatory Specialist II New Filing Section

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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.

(11 1141114 4114141	able in Florida, enter alternate corporate n	ame	adopted for the purpose of transacting business in Florida)	
Alabama		3.	_{3.} 63-0942327	
•	under the law of which it is incorporated)		(FEI number, if applicable)	
12/31/198	6	5.	Perpetual	
(Date	of incorporation)	-	(Duration: Year corp. will cease to exist or "perpetual")	
N/A				
			n Florida, if prior to registration) 502, F.S., to determine penalty liability)	
210 Comm	nerce Street Montgomery,	ΑL	. 36104	
	(Principal office	add	ress)	
210 Comm	nerce Street Montgomery,	ΑL	_ 36104	
	(Current mailing	g add	ress)	
Incurance	ealee and convicee			
	sales and services s) of corporation authorized in home state	or co	ountry to be carried out in state of Florida)	
(Purpose(s) of corporation authorized in home state		ountry to be carried out in state of Florida)	
(Purpose(s) of corporation authorized in home state et address of Florida registered agent:			
(Purpose(s) of corporation authorized in home state		D. Box NOT acceptable) ACCEPTABLE OF THE CONTROL O	
(Purpose) Name and stree Name:	s) of corporation authorized in home state et address of Florida registered agent:		O. Box NOT acceptable) ACCRETARY ACCRETARY ACCRETARY	
(Purpose)	et address of Florida registered agent: Christopher T. Heller		D. Box NOT acceptable) ACCEPTABLE OF THE CONTROL O	

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.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Please see attached Schedule Vice Chairman: Address: __ Director: Address: ___ **B. OFFICERS** President: Please see attached Schedule Address: ____ Vice President: Address: ___ Treasurer: Address: ___ NOTE: If necessary working, attach an addendum to the application listing additional officers and/or directors.

13. PY TUNIU

(Signature of Director or Officer listed in number 12 of the application)

14. Bolling P. Štarke, III - President

(Typed or printed name and capacity of person signing application)

STARKE AGENCY, INC.

Director Schedule

Name

Business Address

Bolling P. Starke, III			
Charles A. Harris, III			
Cynthia B. Howton			
Joseph Kyle Drumwright			

210 Commerce Street Montgomery, Alabama 36104

Officer Schedule

Name and Title

Business Address

Bolling P. Starke, III - President
Charles A. Harris, III - Vice President
Lawrence R. Elliot - Vice President
Joseph Kyle Drumwright - Vice
President
Cynthia B. Howton – Executive Vice
President

210 Commerce Street Montgomery, Alabama 36104 210 Commerce Street Montgomery, Alabama 36104

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SHOWETARY OF STATE

Beth Chapman Secretary of State

P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, Beth Chapman, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the domestic corporation records on file in this office disclose that Starke Agency, Inc. incorporated in Montgomery County, Montgomery, Alabama on December 31, 1986. I further certify that the records do not disclose that said Starke Agency, Inc. has been dissolved.

09 JAN 13 PH 3: 17



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

January 5, 2009

Date

Beth Chapman

Beth Chapman

Secretary of State