

**F11000004811**

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : CORPORATION SERVICE COMPANY  
Account Number : 120000000195  
Phone : (850) 521-1000  
Fax Number : (850) 558-1515

\*\*Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.

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

**FOREIGN PROFIT/NONPROFIT CORPORATION**  
**BROWN & BROWN INSURANCE SERVICES OF CALIFORNIA, INC**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

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J. Stevens DEC 01 2011

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.

1. Brown & Brown Insurance Services of California, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. California 3. 94-3342351
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 07/23/1999 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. upon qualification
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 9 Commercial Blvd, Suite 100, Novato, CA 94949
(Principal office address)

9 Commercial Blvd, Suite 100, Novato, CA 94949
(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 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
By: [Signature] Melissa Bunting
(Registered agent's signature) Assistant VP

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.

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

A. DIRECTORS

Chairman: See attached addendum.

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

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

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

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

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

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

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

B. OFFICERS

President: See attached addendum.

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

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

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

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

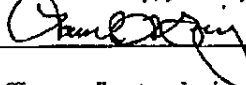
Address: \_\_\_\_\_  
\_\_\_\_\_

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

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

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

13.   
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Laurel L. Grammig, Vice President & Secretary  
(Typed or printed name and capacity of person signing application)

**Brown & Brown Insurance Services of California, Inc.****Directors and Officers**

<b>Name</b>	<b>Title</b>	<b>Business Address</b>
C. Roy Bridges	Director & Chairman	Suite 400 3101 W Martin Luther King Jr Blvd Tampa, FL 33607
Brian Crowley	President	9 Commercial Blvd, Suite 100 Novato, CA 94949
Cory T. Walker	Vice President	220 S Ridgewood Ave. Daytona Beach, FL 32114
Laurel L. Grammig	Vice President & Secretary	Suite 400 3101 W Martin Luther King Jr Blvd Tampa, FL 33607
Thomas M. Donegan, Jr.	Vice President & Assistant Secretary	Suite 400 3101 W Martin Luther King Jr Blvd Tampa, FL 33607
Michele Sanders	Treasurer	Sulte 1600 2800 North Central Avenue Phoenix, AZ 85004

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# State of California Secretary of State

## CERTIFICATE OF STATUS

ENTITY NAME:

BROWN & BROWN INSURANCE SERVICES OF CALIFORNIA, INC.

FILE NUMBER:	C2076089
FORMATION DATE:	07/23/1999
TYPE:	DOMESTIC CORPORATION
JURISDICTION:	CALIFORNIA
STATUS:	ACTIVE (GOOD STANDING)

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I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of November 28, 2011.

*Debra Bowen*

DEBRA BOWEN  
Secretary of State