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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

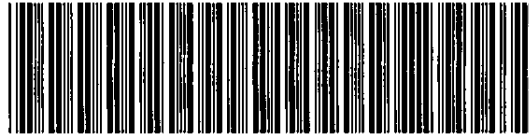
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/04/13--01039--001 **70.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
11/19/13

11/19/13

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Bay Agency Insurance Group Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Brian K. DeSousa

Name of Person

Bay Agency Insurance Group Inc.

Firm/Company

P.O. Box 543

Address

Rumson NJ 07760

City/State and Zip code

Brian_desousa@bayagency.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brian DeSousa

Name of Person

at (732) 741-4637

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 5, 2013

BRIAN K DESOUSA
BAY AGENCY INSURANCE GROUP INC.
PO BOX 543
RUMSON, NJ 07760

SUBJECT: BAY AGENCY INSURANCE GROUP INC.
Ref. Number: W13000061511

RECEIVED
13 NOV 18 PM 12: 07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for BAY AGENCY INSURANCE GROUP 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 date of incorporation listed in block four of the form must match the date listed on the certificate of status from your state.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Ruby Dunlap
Regulatory Specialist II

Letter Number: 613A00025777

Corrected 11-14-13

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. Bay Agency Insurance Group Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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

2. New Jersey

3. 222584607

(State or country under the law of which it is incorporated)

(FEI number, if applicable)

4. 06/20/1986

5. "perpetual"

(Date of incorporation)

(Duration: Year corp. will cease to exist or "perpetual")

6. November 1, 2013

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

7. 93 East River Rd. Rumson NJ 07760

(Principal office address)

P.O. Box 543 Rumson NJ 07760

(Current mailing address)

8. Insurance sales

(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: NRAI Services Inc.

Office Address: 1200 S. Pine Island Rd.

Plantation, Florida 33324

(City)

(Zip code)

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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.

By:

NRAI Services, Inc.

Rachel Glasheen

(Registered agent's signature)

Rachel Glasheen, VP & Assistant Secretary

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: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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TALLAHASSEE, FLORIDA

B. OFFICERS

President: Brian K. DeSousa

Address: 213 Comanche Dr. Oceanport NJ 07757

Vice President: _____

Address: _____

Secretary: Barbara A. DeSousa

Address: 25 Northover Place REd Bank NJ 07701

Treasurer: _____

Address: _____

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. Brian K. DeSousa President

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

**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES
SHORT FORM STANDING**

BAY AGENCY INSURANCE GROUP, INC.

0100302350

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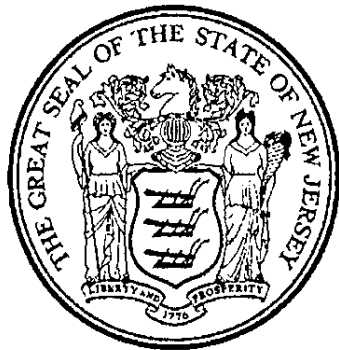
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on June 20, 1986.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

*B A Desouse
93 E River Rd
Rumsom, NJ 07760*



Certification# 130076272

*IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed my
Official Seal at Trenton, this
1st day of November, 2013*

*Andrew P Sidamon-Eristoff
State Treasurer*

Verify this certificate at
https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp