P0800000871

(Re	equestor's Name)			
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PRY OF SIAIE CORPORATIONS

FORMATIONS

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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Jansen & Ha	astings Insurance Services
	•
DOCUMENT NUMBER:	F08000000871
The enclosed Amendment and fee are sub-	mitted for filing.
Please return all correspondence concerning	ng this matter to the following:
Kathy Conger Name of Contact Person	
Name of Contact Person	
Jansen & Hastings Insurance S	Services
Firm/Company	
120 E. Lake Street #31	1
Address	
Sandpoint, Idaho 83864 City/State and Zip Code	4
kathy.conger@jhinsurar E-mail address: (to be used for future ann	nce.com
For further information concerning this ma	atter, please call:
Kathy Conger Name of Contact Person	at (877) 544-4399 Area Code & Daytime Telephone Number
Enclosed is a check for the following amou	ınt:
\$35.00 Filing Fee \$43.75 Filing Fee & Certificate of State	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee. Certificate of Status & Certificate of St
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 29, 2011

KATHY CONGER JANSEN & HASTINGS INSURANCE SERVICES INC 120 E. LAKE ST. #311 SANDPOINT, FL 83864

SUBJECT: JANSEN & HASTINGS INSURANCE SERVICES, INC.

Ref. Number: F08000000871

We have received your document for JANSEN & HASTINGS INSURANCE SERVICES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is L09000106435 - J & H INSURANCE SERVICES LLC.

Please return 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) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 911A00017956

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

F0800000871				
	(Document nu	mber of corporation (if	`known)	
1	Jansen & Hastir			MISION
	(, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		D	. 0
2	California (Incorporated under laws of)	3	04/30/2008 Date authorized to do business in Florida)	<u> </u>
		•	,	**************************************
		SECTION II		\$
	(4-7 COMPLETE OF	NLY THE APPLICAB	LE CHANGES)	
4. If the an	nendment changes the name of the corpo	ration, when was th	e change effected under the laws of	
	diction of incorporation? 06	•	·	
			ne	
5. (Name o	JH Insufficorporation after the amendment, adding riate abbreviation, if not contained in new	ng suffix "corporati	on," "company," or "incorporated," or	<u> </u>
appropi	riate abbreviation, if not contained in nev	w name of the corpo	oration)	
		· 		
(If new name business	ame is unavailable in Florida, enter alter s in Florida)	nate corporate nam	e adopted for the purpose of transactin	g
	,			
6. If the am	endment changes the period of duration,	indicate new perio	d of duration.	
		(New duration)	 	
7. If the am	endment changes the jurisdiction of inco	orporation, indicate	new jurisdiction.	
		New jurisdiction)	·	
	· ·	,		. •
3. Attached 90 days p having cu	is a certificate or document of similar in prior to delivery of the application to the ustody of corporate records in the jurisdi	nport, evidencing the Department of State etion under the law	ne amendment, authenticated not more e, by the Secretary of State or other of s of which it is incorporated.	than ficial
	Janu Reaver			
(Sig	gnature of a director president or other officer - a regeiver or other court appointed fiduciary, by	if in the hands that fiduciary)		
	Janet Beaver		Sr. Vice President	
	(Typed or printed name of person signing)		(Title of person signing)	