



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

January 7, 2000

JACK W. ROBERTSON, JR.
4785 I-55 NORTH, SUITE 200
JACKSON, MS 39206

SUBJECT: GULF GUARANTY LIFE INSURANCE COMPANY
Ref. Number: W00000000605

We have received your document for GULF GUARANTY LIFE INSURANCE COMPANY and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report/uniform business report fees due this office.)

The registered agent must sign accepting the designation.

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) 487-6020.

Tammi Cline
Document Specialist

Letter Number: 700A00000963

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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January 25, 2000

Ms. Tammi Cline
Division of Corporations
Florida Department of State
Post Office Box 6327
Tallahassee, FL 32314

Re: Gulf Guaranty Life Insurance Company

Dear Ms. Cline,

Enclosed please find a copy of your letter to me dated January 7, 2000, and the completed documents you requested. This includes the registered agent's signature under #10 of the Application.

If you have any questions, please contact me personally, or John Bryan at (601) 981-4920. Thank you for your attention in this matter.

Very truly yours,

Jack W. Robertson, Jr.

Jack W. Robertson, Jr.
President

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: Gulf Guaranty Life Insurance Company
(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", 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:

Jack W. Robertson, Jr.
(Name of Person)
Gulf Guaranty Life Insurance Company
(Firm/Company)
4785 I-55 North, Suite 200
(Address)
Jackson, MS 39206
(City/State/Zip)

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TALLAHASSEE, FLORIDA

Should you need to call someone concerning this matter, please call:

John Bryan at (601) 981-4920
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien 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

**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. Gulf Guaranty Life Insurance Company

(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. Mississippi

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

3. FEI# 640501131

(FEI number, if applicable)

4. February 19, 1970

(Date of incorporation)

5. perpetual

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

6. Upon Qualification

(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 4785 I-55 North, Suite 200, Jackson, MS 39206

(Current mailing address)

8. Organized as a Stock Company, currently transacting Life, Accident and Health insurance.
(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: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida, 33324

(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.

M. J. Brea

(Registered agent's signature)

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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TALLAHASSEE FLORIDA

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: Jack W. Robertson, Jr.

Address: 338 St. Andrews Dr., Jackson, MS

Vice Chairman: _____

Address: _____

Director: John Howard Vaught

Address: Hwy 6 West, Oxford, MS

Director: Arthur Wilman Pigott

Address: 71 Wolf Howling Road, Columbia, MS

(see attached list of additional directors)

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: Jack W. Robertson, Jr.

Address: 338 St. Andrews Dr., Jackson, MS

Vice President: Sarah Ellen Methvin

Address: 1821 Lincolnshire, Ridgeland, MS

Secretary: Betty Jean Penson

Address: 1920 Pardue Rd., Raymond, MS

Treasurer: Betty Jean Penson

Address: 1920 Pardue Rd., Raymond, MS

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TALLAHASSEE, FLORIDA

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

13. _____
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Jack W. Robertson, Jr. President
(Typed or printed name and capacity of person signing application)

**Gulf Guaranty Life Insurance Company
Board of Directors**

(continued from Transmittal Letter)

Alley Stephen Ballard, Jr.
35 Park Street, Hernando, MS

McWillie Mitchell Robinson, Jr.
3850 Eastover Dr., Jackson, MS

Richard Covey Robertson
5329 Briarfield Rd., Jackson, MS

James Hilbun Robertson
203 Ray Bridge Dr., Hattiesburg, MS

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

State of Mississippi

Secretary of State's Office

Eric Clark

Secretary of State
Jackson, Mississippi

CERTIFICATE

I, Eric Clark, Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records, required by the laws of Mississippi, to be filed in my office, do hereby certify as follows:

That on February 20, 1970, the State of Mississippi issued a charter to **GULF GUARANTY LIFE INSURANCE COMPANY**.

That the registered office of said corporation is located at 1804 Walter Sillers Building, P.O. Box 79, Jackson, Mississippi, and the registered agent at that address is Insurance Commissioner.

That insofar as the records of this office are concerned the said Gulf Guaranty Life Insurance Company is in good standing at this time.

Given under my hand
and seal of office
December 2, 1999



Eric Clark
Secretary of State

