

F000000006458

TRANSMITTAL LETTER

To: Registration Section
Division of Corporations

MJH

SUBJECT: Olde South Insurance Consulting Services, Inc
(Name of corporation - must include suffix)

Dear Sir or Madam: 00789-00524-00671

W-26468

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:

600003443746--1
-10/30/00--01109--012
*****87.50 *****87.50

Charles Lee Jackson

(Name of Person)

Olde South Ins Consulting

(Firm/Company)

1000 Hurricane Shoals Rd, Bldg C - Suite 300-B

(Address)

Lawrenceville, GA 30083 30043

(City/State/Zip)

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

Chuck Jackson

(Name of Person)

at (770) 277-1642

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 NOV 16 AM 9:54

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
Katherine Harris
Secretary of State

November 3, 2000

CHARLES LEE JACKSON
OLDE SOUTH INSURANCE CONSULTING SERVICES
1000 HURRICANE SHOALS RD, BLD C, STE 300
LAWRENCEVILLE, GA 30043

SUBJECT: OLDE SOUTH INSURANCE CONSULTING SERVICES, INC.
Ref. Number: W00000026468

We have received your document for OLDE SOUTH INSURANCE CONSULTING SERVICES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must complete and sign the attached officer/director page.,

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) 487-6967.

Michelle Hodges
Document Specialist

Letter Number: 400A00057285

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. Olde South Insurance Consulting Services, Inc
(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. Georgia 3. 58-2493368
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. July 5, 1999 5. perpetual
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. expected 12/01/2000
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.))
7. 1000 Hurricane Shoals Rd, Bldg C, Suite 300B
Lawrenceville, Ga 30043
(Current mailing address)
8. Third Party Administration and Insurance Claims Consulting
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent:

Name: Nora O'Connell
Office Address: 1115 1st Street
Neptune Beach, , Florida , 32266
(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.

Nora O'Connell

(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.

NOV 16 AM 9:54
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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

A. DIRECTORS

Chairman: Brian M McCoy, C.E.O.

Address: 1000 Hurricane Shoals Road, Building C-300-B, Lawrenceville, Georgia 30043

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Charles L. Jackson

Address: 1000 Hurricane Shoals Road, Building C-300-B, Lawrenceville, Georgia 30043

Vice President: _____

Address: _____

Secretary: Charles L. Jackson

Address: 1000 Hurricane Shoals Road, Building C-300-B, Lawrenceville, Georgia 30043

Treasurer: _____

Address: _____

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

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

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

Secretary of State
Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

DOCKET NUMBER : 002900378
CONTROL NUMBER : K929701
DATE INC/AUTH/FILED: 07/16/1999
JURISDICTION : GEORGIA
PRINT DATE : 10/16/2000
FORM NUMBER : 211

OLDE SOUTH INS CONSULTING
CHARLES L. JACKSON
1000 HURRICANE SHOALS RD BLDG C STE 300B
LAWRENCEVILLE, GA 30043

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

OLDE SOUTH INSURANCE CONSULTING SERVICES, INC.
A DOMESTIC PROFIT CORPORATION

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



Cathy Cox
Secretary of State