

SunTrust Banks, Inc.  
Mail Code 643SP  
303 Peachtree Street, N.E.  
29th Floor, Suite 2950  
Atlanta, Georgia 30308  
Tel (404) 588-8586  
Fax (404) 724-3550

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Pamela J. Croxton, CL  
Certified Legal Assistant

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November 20, 2000  
EXPEDITED REQUEST

VIA UNITED PARCEL SERVICE  
Florida Department of State  
Registration Section  
409 East Gaines Street  
Tallahassee, FL 32399

500003472945-4  
-11/21/00-01081-001  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Re: SunTrust Insurance Services, Inc.  
Qualification to Transact Business in Florida

Dear Sir or Madam:

Please find enclosed the following:

1. Completed Transmittal Letter;
2. Completed Application by Foreign Corporation for Authorization to Transact Business in Florida;
3. Certificate of Existence / Good Standing of SunTrust Insurance Services, Inc.; and
4. Check in the amount of \$78.75 for your services.

After processing the application, please issue a Certificate of Status and return it to me in the enclosed UPS mailer. If you need anything further, please do not hesitate to call me at the above number. Your prompt attention to this request will be appreciated.

Sincerely,  
*Pamela J. Croxton*  
Pamela J. Croxton, CLA  
Certified Legal Assistant

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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\pj  
Enclosures  
cc: Georgett Dickinson  
Ann Kimsey

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SunTrust Insurance Services, 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", 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:

Georgett B. Dickinson  
(Name of Person)

SunTrust Banks, Inc.  
(Firm/Company)

303 Peachtree Street, N.E., Suite 2950, 29th Floor  
(Address)

Atlanta, GA 30308  
(City/State and Zip code)

For further information concerning this matter, please call:

Pamela J. Croxton at ( 404 ) 588-8586  
(Name of Person) (Area Code & Daytime Telephone Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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

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. SunTrust Insurance 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 (State or country under the law of which it is incorporated) 3. 58-2326680 (FEI number, if applicable)

4. June 27, 1997 (Date of incorporation) 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")

6. Upon qualification (Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification." (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 25 Park Place, 23rd Floor, Atlanta, GA 30303 (Principal office address)

Same as above

(Current mailing address)

8. Insurance agency - offer & sale of insurance products to customers. (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: Cathy Homa-Arther

Office Address: 200 South Orange Avenue

Orlando, Florida 32801 (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.

Cathy Homa Arther (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.

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

**A. DIRECTORS**

Chairman: See attached

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

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

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

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

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

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

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

**B. OFFICERS**

President: See attached

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

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

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

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

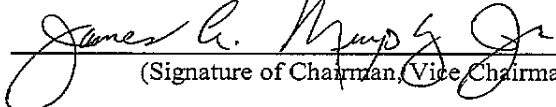
Address: \_\_\_\_\_

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 Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. James A. Murphy, Jr. / President  
(Typed or printed name and capacity of person signing application)

SUNTRUST INSURANCE SERVICES, INC.  
Officers

Chief Executive Officer  
And Chairman of the Board

Michael A. Kinsey  
303 Peachtree St., N.E.  
44<sup>th</sup> Floor  
Atlanta, GA 30308

President

James A. Murphy, Jr.  
25 Park Place  
23<sup>rd</sup> Floor  
Atlanta, GA 30303

Senior Vice President

Clark R. Thompson  
25 Park Place  
23<sup>rd</sup> Floor  
Atlanta, GA 30303

Senior Vice President

Joseph W. Cahoon  
25 Park Place  
23<sup>rd</sup> Floor  
Atlanta, GA 30303

Vice President

Wallace Link Baker  
303 Peachtree Street, N.E.  
Atlanta, GA 30308

Vice President and  
Compliance Officer

Ann Kimsey  
303 Peachtree Street, N.E.  
29<sup>th</sup> Floor, Suite 2950  
Atlanta, GA 30308

Vice President

Bill Staton  
498 Palm Springs Drive  
Altamonte Springs, FL 32701

Vice President

Cathleen L. Sanger  
1001 Semmes Avenue  
Richmond, VA 23224

Secretary/Treasurer

Mehboob Vellani  
303 Peachtree Street, N.E.  
5<sup>th</sup> Floor  
Atlanta, GA 30308

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SUNTRUST INSURANCE SERVICES, INC.

Directors

William H. Davison  
120 S. Ridgewood Avenue  
Daytona Beach, FL 32115

Jimmy O. Williams  
200 South Orange Avenue  
Orlando, FL 32802

Edward B. James  
25 Park Place  
3<sup>rd</sup> Floor  
Atlanta, GA 30303

Michael A. Kinsey  
303 Peachtree Street, N.E.  
44<sup>th</sup> Floor  
Atlanta, GA 30308

Dennis M. Patterson  
303 Peachtree Street, N.E.  
30<sup>th</sup> Floor  
Atlanta, GA 30308

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TALLAHASSEE, FLORIDA

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

DOCKET NUMBER : 003180332  
CONTROL NUMBER : K722718  
DATE INC/AUTH/FILED: 06/27/1997  
JURISDICTION : GEORGIA  
PRINT DATE : 11/13/2000  
FORM NUMBER : 211

SUNTRUST BANKS, INC.  
PAMELA CROXTON  
303 PEACHTREE ST NE STE 2950 29TH FL  
ATLANTA, GA 30308

**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

**SUNTRUST INSURANCE 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.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Cathy Cox  
Secretary of State