

Division of Corporations Rankin Insurance, 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: Pat Jeffreys (Name of Person) Rankin Insurance, Inc. <del>-09/17/01--01074--</del>003 (Firm/Company) \*\*\*\*\*\*70.00 \*\*\*\*\*70.00 620 Walnut St., NE 900004593749-(Address) -09/17/01--01074--004 \*\*\*\*\*17.50 \*\*\*\*\*17.50 Decatur, AL 35601 (City/State and Zip code) For further information concerning this matter, please call: Pat Jeffreys at ( 256 ) 353-7931 (Name of Person) (Area Code & Daytime Telephone Number) STREET ADDRESS: MAILING ADDRESS: Registration Section Registration Section **Division of Corporations Division of Corporations** 409 E. Gaines St. P.O. Box 6327 Tallahassee, FL 32399 Tallahassee, FL 32314 Enclosed is a check for the following amount: ■ \$70.00 Filing Fee □ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & \$87.50 Filing Fee, Certificate of Status Certified Copy

Certificate of Status &

Certified Copy



## **ANKIN** Insurance Inc.

**MEMORANDUM** 

**INSURING YOUR FUTURE** 

TO: St of FL/Registration Section DATE: 09-14-2001

FROM: Pat Jeffreys

POLICY NO.:

SUBJECT: Registration of a Corporation

Enclosed is completed application, transmittal letter, Original Certificate of Existence, and our checks for \$70.00 (Filing Fee) and (17.50 for two (2) Certificates of Status).

Thank you, and please let us know if anything further is needed to process this transaction. (1800-660-5937)

Pat Jeffrevs Licensing

pj/

Enclosures

## 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.	Rankin Insurance, Inc.					
	(Name of corporation; must include the word "INCORPOR words or abbreviations of like import in language as will clear natural person or partnership if not so contained in the name	early	indicate that it is a corporation instead of a			
2.	Alabama	3.	63-0520984			
	(State or country under the law of which it is incorporated)	_	(FEI number, if applicable)			
4.	1918	5.				
	(Date of incorporation)		(Duration: Year corp. will cease to exist or "perpetual"	<u>')</u>		
6.	August 1, 2001					
	(Date first transacted business in Florida. If corporation has (SEE SECTIONS 607.1		transacted business in Florida, insert "upon qualification, 607.1502 and 817.155, F.S.)	<u>.")</u>		
7. 620 Walnut St., NE; Decatur, AL 35601						
	(Principal office	addr	ess)			
P. O. Box F; Decatur, AL 35602-9006						
,	(Current mailing	addr	ess)			
8.	Insurance Agency (Purpose(s) of corporation authorized in home state or		2 9	NVISION		
			· · · · · · · · · · · · · · · · · · ·	\$500 P		
9.	Name and street address of Florida registered ager		(P.O. Box or Mail Drop Box NOT acceptable)	CCX E		
	Name: Donald C. Sprou	-2(	Suite #100	PORM		
Of	fice Address: 5150 Tamiama Trail, Nort	<u>.h,</u>	Suite #100	E SE		
	Naples		, Florida <u>34103</u>			
	(City)	,	(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.

(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.

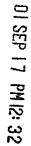
12. Names and business addresses of officers and/or directors:

A. DIRECT	ORS	
Chairman:	Victor E. Nichol, Jr.	
Address:	1927 1st Ave., North	
-	Birmingham, AL 35203	
Vice Chairman	: Dan David	- A-4
Address:	251 Johnston Street, SE	
	Decatur, AL 35601	
Director:	Skip Thompson	<u> </u>
Address:	251 Johnston Street, SE	 
	Decatur, AL 35601	
Director:	David L. Mulder	
Address:	1927 1st Ave., North	
	Birmingham, AL 35203	
B. OFFICER	<b>2S</b>	
	David B. Duke	0
	620 Walnut St., NE	I SECR
	Decatur, AL 35601	17 SEE
	Joseph J. Podlesny	PMI2:
	620 Walnut St., NE	<u> </u>
	Decatur, AL 35601	<b>2</b> NS
Exec. VP & Secretary:	Ron W. Earley	
	620 Walnut St., NE: Decatur, AL 35601	
Treasurer:	· · · · · · · · · · · · · · · · · · ·	
Address:		
NOTE: If piece	Cessary, you may attach an addendum to the application listing additional officers and the second of the application listing additional officers and the second of the action of the second of the sec	
14. <u>Ro</u>	on W. Earley, Executive Vice-President & Secretary  (Typed or printed name and careaity of person signing application)	

## STATE OF ALABAMA

I, Jim Bennett, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the domestic corporation records on file in this office disclose that Rankin Insurance, Inc. incorporated in Morgan Alabama on May 2, 1966. I further certify County, Decatur, that the records do not disclose that said Rankin Insurance, Inc. has been dissolved.





In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

August 31, 2001

Date

Jim Bennett

Secretary of State