

# F02000003264

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MIDWEST INSURANCE AGENCY, 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:

DONNA BENEVICE

(Name of Person)

MIDWEST INSURANCE AGENCY, INC.

(Firm/Company)

1420 KENSINGTON ROAD SUITE 209

(Address)

OAK BROOK IL 60523.

(City/State and Zip code)

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-06/25/02--01045--002

\*\*\*\*\*87.50 \*\*\*\*\*87.50

For further information concerning this matter, please call:

DONNA BENEVICE

(Name of Person)

at ( 630 ) 928-4700

(Area Code & Daytime Telephone Number)

02 JUN 25 PM 12:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Name Availability	STREET ADDRESS:
Document Examiner	Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

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

Acknowledgement	DCC
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P. Verifier	DCC
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**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

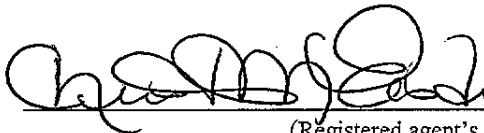
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. MIDWEST INSURANCE AGENCY, 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. ILLINOIS 3. 36-4106875  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 9-10-96 5. PERPETUAL  
(Date of incorporation) (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. 1420 KENSINGTON ROAD SUITE 209 OAK BROOK IL 60523  
(Principal office address)  
1420 KENSINGTON ROAD SUITE 209 OAK BROOK IL 60523  
(Current mailing address)
8. INSURANCE AGENCY / SALES  
(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  
(City) (Zip code)

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TALLAHASSEE, FLORIDA

**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)

Christine M. Eastwine  
Assistant Secretary

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: \_\_\_\_\_

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

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

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

Director: WILLIAM BLACKWELL

Address: 1420 KENSINGTON ROAD SUITE 209  
OAK BROOK IL 60523

Director: JEFFREY WILLIAMS

Address: 1420 KENSINGTON ROAD SUITE 209  
OAK BROOK IL 60523

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B. OFFICERS

President: WILLIAM BLACKWELL

Address: 1420 KENSINGTON ROAD SUITE 209  
OAK BROOK IL 60523

Vice President: JEFFREY WILLIAMS

Address: 1420 KENSINGTON ROAD SUITE 209  
OAK BROOK IL 60523

Secretary: WILLIAM BLACKWELL

Address: 1420 KENSINGTON ROAD SUITE 209 OAK BROOK IL  
60523

Treasurer: WILLIAM BLACKWELL

Address: 1420 KENSINGTON ROAD SUITE 209 OAK BROOK IL 60523

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

13. William C Blackwell

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

14. William C. Blackwell

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

**MIDWEST INSURANCE AGENCY, INC.**

1420 KENSINGTON ROAD, SUITE 209

OAK BROOK, IL 60523

Telephone # (630) 323-1017

William Blackwell, President, Secretary, Treasurer

1055 Chaffield Road

Winnetka, IL 60093

Business Address

**MIDWEST INSURANCE AGENCY, INC.**

1420 Kensington Road, Suite 209

Oak Brook, IL 60523

Jeffrey Williams, Vice President

1000 Barberry Lane

Mt. Prospect, IL 60056

Business Address

**MIDWEST INSURANCE AGENCY, INC.**

1420 Kensington Road, Suite 209

Oak Brook, IL 60523

State of Incorporation: Illinois

Date of Incorporation: 09-10-96

Duration of Corporation: Perpetual

Number of Shares: 1,000

Class of Shares: Common

Series of Shares: None

Par Value of Shares: No Par Value

Federal Identification Number: 36-4106875

Attorney: ( Aaron Shepley

500 Coventry Lane, Suite 180

Crystal Lake, IL 60014

Telephone # (815) 479-0531

Registered Agent:

Central Leasing Management, Inc.

501 W Butler Road, Suite C

Greenville, SC 29607

Telephone Number (888) 323-0650



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that MIDWEST INSURANCE AGENCY, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE SEPTEMBER 10, 1996, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE FILING OF ANNUAL REPORTS AND PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS\*\*\*\*\*

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02 MAR 25 PM 12:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



In Testimony Whereof, I, hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 28TH day of MARCH 2002 A.D.

Jesse White

SECRETARY OF STATE