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00789-00644-00671			
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
3/28 FOR LOPP			
W031718			

Office Use Only



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TRANSMITTAL LETTER

TO: Registration Sec Division of Cor			
SUBJECT: Rob	OBRT SHOR INS (Name of corporate	URANCE ASSOC	IATES, INC
	(Name of corporat	ion - must include suffix)	
Dear Sir or Madam:			
	on by Foreign Corporation for, and check are submitted to lorida.		
-	ondence concerning this matt		
Robert	(Name of SHOR INSURAN)		. •
2	(Name	of Person)	
ROBERT	SHOK INSURAN	CE ASSOCIATES	In c
	(Firm/C	ompany)	
1010 RIV	AS CANYON RO	40	
PACIFIC 1	PAAISADES (City/State	dress) A. 90272	
	(City/State	and Zip code)	
For further information	concerning this matter, please	call:	
SUZANNO 5	HOR at (310	1551-2800	K321
(Name of Perso	on) (Area	Code & Daytime Telepho	one Number)
STREET ADDRESS: Registration Section Division of Corporation 409 E. Gaines St. Tallahassee, FL 32399 Enclosed is a check for	s	MAILING ADDRESS Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	ns
enclosed is a check for	me following amount:		
\$\$ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	Say \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 18, 2003

ROBERT E. SHOR ROBERT SHOR INSURANCE ASSOCIATES, INC. 1010 RIVAS CANYON ROAD PACIFIC PALISADES, CA 90272

SUBJECT: ROBERT SHOR INSURANCE ASSOCIATES, INC.

Ref. Number: W03000007718

We have received your document for ROBERT SHOR INSURANCE ASSOCIATES, INC. and your check(s) totaling \$70.00. 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.)

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) 245-6967.

Letter Number: 203A00016671

Michelle Hodges Document Specialist

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

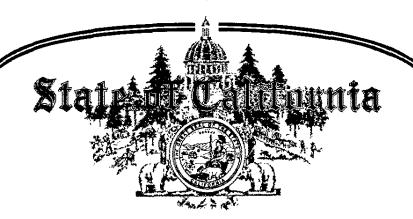
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

	RT SHOR INSURANCE ASSOC		
words or abbre	oration; must include the word "INCORPORATED", viations of like import in language as will clearly ind	icate that it is a corporation instead of a	
natural person	or partnership if not so contained in the name at prese	ent.)	
2	y under the law of which it is incorporated)	15-3075003	
3			1
4. 11/05	te of incorporation) 5- (De	PERPETUAL	
(Da	te of incorporation) (Di	uration: Year corp. will cease to exist of	or "perpetual")
6. U	OON QUALIFICATION		· ·
(Date first trans	acted business in Florida. If corporation has not trans (SEE SECTIONS 607.1501, 607.	sacted business in Florida, insert "upor 7.1502 and 817.155, F.S.)	qualification.")
71010	O RIVAS CANYON ROAD (Principal office address)	PACIFIC PAHISAZ	065, CA-90272
	Same		
	(Current mailing address)		
8	(s) of corporation authorized in home state or country		
(Purpose	(s) of corporation authorized in home state or country	y to be carried out in state of Florida)	3 3
9. Name and st	reet address of Florida registered agent: (P.C	D. Box or Mail Drop Box <u>NOT</u> acc	
Name:	NRAI Services, Inc.		28 28
name:	Tital Octaon, mor	-	
Office Address:	526 E. Park Avenue	-	55 % D
	Tallahassee	, Florida <u>32301</u>	ED PM 2:37 OF STATE EFLORID
	(City)	(Zip code)	<i>S</i>
10 Posistered	agent's acceptance:		
~	agent's acceptance. med as registered agent and to accept service o	f process for the above stated corp	poration at the place
	is application, I hereby accept the appointment		
	comply with the provisions of all statutes relat familiar with and accept the obligations of my		gormance of my
	IRAI Services, Inc.	. 5 5	
	By: Regina Clinkin		
-	(Registered agent's signat	ure)	,

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. DIREC	
Chairman: _	ROBERT B. SHOR
Address:	1010 RIVAS CANYON ROAD
	PACIFIC PAKISADOS, CA 90272
	un;
Address:	
Director:	
Address:	
Director:	
Address:	
Address:	RODERT E. SHOR 1010 RIVAS CANYON ROAD PACIFIC PAHISHDES CA 90272
Address:	
Secretary:	SUZANNE M. SHOR
Address:	1010 KIUAS CANYON ROAD, PACIFIC PAKISKDOS, (A 9007)
Treasurer: _	
Address:	
NOTE: If n	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. 7	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
• * •	(Typed or printed name and capacity of person signing application)



SECRETARY OF STATE

CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, KEVIN SHELLEY, Secretary of State of the State of California, hereby certify:

That on the 5TH day of NOVEMBER, 1976, ROBERT SHOR INSURANCE ASSOCIATES, INC. became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That no record exists in this office of a certificate of dissolution of said corporation nor of a court order declaring dissolution thereof, nor of a merger or consolidation which terminated its existence; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of February 24, 2003.

KEVIN SHELLEY
Secretary of State