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## FOREIGN PROFIT QUALIFICATION

Allmerica Plus Insurance Agency, Inc.

Certificate of Status	0
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Page Count	06
Estimated Charge	\$70.00

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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. Allmerica Plus Insurance Agency, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Massachusetts 3. 04-3194493  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 06/10/93 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. 440 Lincoln Street Worcester, Ma 01653  
(Principal office address)

440 Lincoln Street Worcester, Ma 01653  
(Current mailing address)

8. To serve as an insurance agency  
(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)

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.*

CT Corporation System

By: *Lauren Krenz* LAUREN H. KRENTZ  
(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 list of officers and directors.

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

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

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

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

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

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

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

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WASHINGTON, DC 20548

**B. OFFICERS**

President: See attached list of officers and directors.

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

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

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

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

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

Treasurer: \_\_\_\_\_

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

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

13. *Charles F. Cronin*  
(Signature of Director or Officer listed in number 12 of the application)

14. Charles F. Cronin, Secretary  
(Typed or printed name and capacity of person signing application)

12/27/2004  
Page 1

**Officers and Directors w/Business Address**

**Allmerica Plus Insurance Agency, Inc.**

<u>Director</u>	<u>Title</u>
Lee D. Davidson	Director
Marilyn G. Norman	Director
Marita Zuraitis	Director
<u>Officer</u>	<u>Title</u>
William J. Cahill Jr.	Assistant Clerk
Charles F. Cronin	Clerk
Lee D. Davidson	Chief Compliance Officer
Franklin D. Figueiredo	Assistant Vice President
Michael D. Lorion	Assistant Vice President
Mark C. McGivney	Assistant Treasurer
Marilyn G. Norman	Treasurer
K. David Nunley	President
Edward J. Parry III	Vice President
	Vice President

Lee Davidson

Business Address: 440 Lincoln Street  
Worcester, MA 01653

Marilyn Norman

Business Address: 440 Lincoln Street  
Worcester, MA 01653

Marita Zuraitis

Business Address: 440 Lincoln Street  
Worcester, MA 01653

William Cahill Jr.

Business Address: 440 Lincoln Street  
Worcester, MA 01653

Charles Cronin

Business Address: 440 Lincoln Street  
Worcester, MA 01653

Franklin Figueiredo

Business Address: 440 Lincoln Street  
Worcester, MA 01653

Michael Lorion

Business Address: Allmerica Plus Insurance Agency,  
Inc.  
Assistant Treasurer

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 SECRETARY OF STATE  
 HALLMARK BUILDING  
 100 WATER STREET  
 BOSTON, MA 02109

12/27/2004  
Page 2

**Officers and Directors w/Business Address**

440 Lincoln Street  
Worcester, MA 01653

Mark McGivney

Business Address: 440 Lincoln Street  
Worcester, MA 01653

K. Nunley

Business Address: 440 Lincoln St  
Worcester, MA 01653

Edward Parry III

Business Address: 440 Lincoln Street  
Worcester, MA 01653

SECRETARY OF STATE  
TULLAMON STREET  
BOSTON, MA 02126

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FEB 28



*The Commonwealth of Massachusetts*  
*Secretary of the Commonwealth*  
*State House, Boston, Massachusetts 02133*

William Francis Galvin  
Secretary of the  
Commonwealth

December 24, 2004

TO WHOM IT MAY CONCERN:

I hereby certify that according to the records of this office,

**ALLMERICA PLUS INSURANCE AGENCY, INC.**

is a domestic corporation organized on June 10, 1993, under the General Laws of the Commonwealth of Massachusetts.

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.

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SECRETARY OF STATE  
L. M. B. S. E. P. H. E. R. E. T. T. E. R. S.

In testimony of which,  
I have hereunto affixed the  
Great Seal of the Commonwealth  
on the date first above written.



*William Francis Galvin*  
Secretary of the Commonwealth