F0600003854

(Requestor's Name)
(Address)
(
(Address)
(City/State/Zip/Phone #)
(City/State/ZID/Priorie #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
1, 1/d
Office Use Only
1 / 10/-
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05/17/06--01027--004 **78.75

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*** PROMPT ATTENTION REQUESTED ***

5/11/2006

Corp. Div. FL Secy. of State P.O. Box 6327 Tallahassee, FL 32314

Re: Security First Insurance, Inc.

Enclosed are the necessary applications to qualify the above referenced foreign corporation. Included are check(s) in the amount of \$78.75.

This corporation is anxious to obtain an insurance license in your state. Therefore, please process their application as soon as possible and forward the approved duplicate copy (if applicable) and Certificate of Authority to my attention (ppd. env. attached).

If you have any questions or require additional information, please contact me at 214-855-0737. Your cooperation and prompt attention to this request is greatly appreciated.

Sincerely, Kennedy Licensing Service, Inc.

Rhonda Reese

Rhonda Reese Sr Int'l & Ren Spec

Email: rreese@kennedylicensing.com

cc: Security First Insurance, Inc.

VICTRIX (FL), Reg. Agt.

Enc: \$78.75 check, App. in dup.,, Cert. G.S.



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 19, 2006

JOHN D. HATCH, ESQ. 1267 BERKSHIRE LANE SUITE 200 TARPON SPRINGS, FL 34688

SUBJECT: SECURITY FIRST INSURANCE, INC.

Ref. Number: W06000023277

We have received your document for SECURITY FIRST INSURANCE, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return 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) 245-6934.

Loria Poole Document Specialist

Letter Number: 206A00035385

COVER LETTER

Pro: New Filing Section Division of Corporations
SUBJECT: Security First 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 ransact business in Florida.
Please return all correspondence concerning this matter to the following:
Rhonda Reese
(Name of Person)
Kennedy Licensing Service, Inc.
(Firm/Company)
2501 Thomas Avenue
(Address)
Dallas, TX 75201
(City/State and Zip code)
For further information concerning this matter, please call:
Rhonda Reese at (214) 855-0737
(Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building Clother Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing 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 & \$78.75 Filing Fee & S87.50 Filing Fee, Certificate of Status Certified Copy 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.	Security First Insurance, Inc.	
	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	
	N/A	
	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	
	<u>Connecticut</u> 3. 06-1118345	
	(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4.	₁₀₋₁₋₈₄ _{5.} perpetual	
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	
6.	upon qualification	
	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
7.	255 Bank St.	
,	(Principal office address)	
	Waterbury, CT 06702	
	(Current mailing address)	
8.	Nonresident insurance agency sales and service	
	(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 NOT acceptable)	
	Name: John D. Hatch, Esquire	9
0	ffice Address: 1267 Berkshire Lane, Suite 200	
	Tarpon Springs ,Florida 34688	
	(City) (Zip code)	O
10	Registered agent's acceptance:	
H	aving been named as registered agent and to accept service of process for the above stated corporation at the pl	ace

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. DIRECTORS Chairman: See attached list Address: _ Vice Chairman: Address: ___ Director: Address: ____ Director: Address: ___ **B. OFFICERS** President: SEE ATTACHED LIST Address: ____ Vice President: Address: Secretary: ___ Address: ___ Treasurer: ___ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application)

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

James R. George, President

Security First Insurance, Inc.

Stockholders, Officers & Directors

James R. George 40% Stockholder President & Director 32 Lindsley Dr. Wolcott, CT 06716

John A Novak 40% Stockholder Exec.Vice Pres. & Secretary 138 Washington Ave. Woodbury, CT 06716

> Allen J. Brand 20% Stockholder 32 Doe Hollow Dr. Trumbull, CT 06611

61-66 Rev. 2/94

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof, DO HEREBY CERTIFY, that

MAY 0 2 2006

SECURITY FIRST INSURANCE AGENCY, INC.

a STOCK corporation under the Connecticut General Statutes was filed in this office on September 28, 1984. The following comprises a list of amendments changing its name as filed in this office as of the date of this certificate:

AMENDMENTS CHANGING THE NAME TO

GEGURTTT FIRST INSURANCE, INC.

File Date:

February 28, 1989

Insofar as the records of this office reveal, the corporation is in existence.

Secretary of the State

Date Issued: April 28, 2006