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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**KENNEDY LICENSING SERVICE, INC.**

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**\*\*\* PROMPT ATTENTION REQUESTED \*\*\***

5/19/2006

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

Re: **Monument Agency, 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.

*Hailey Overby*

Hailey Overby  
Initial Licg. Spec.  
Email: [hoverby@kennedylicensing.com](mailto:hoverby@kennedylicensing.com)

cc: Monument Agency, Inc.  
VICTRIX (FL), Reg. Agt.

Enc:

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Monument 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:

Hailey Overby

(Name of Person)

Kennedy Licensing Services, Inc.

(Firm/Company)

2501 Thomas Ave.

(Address)

Dallas, TX 75201

(City/State and Zip code)

For further information concerning this matter, please call:

Hailey Overby

(Name of Person)

at ( 214 ) 855-0737

(Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center 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 &  
Certificate of Status

☒ \$78.75 Filing Fee &  
Certified Copy

☐ \$87.50 Filing Fee,  
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. Monument 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. New York

(State or country under the law of which it is incorporated)

3. 16-1439817

(FEI number, if applicable)

4. 12/05/94

(Date of incorporation)

5. Pereptual

(Duration: Year corp. will cease to exist or "perpetual")

6. N/A

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1310 Utica Street Oriskany, NY13424

(Principal office address)

same

(Current mailing address)

8. Nonresident Insurance Agency Sales & Services

(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

Office Address: 1267 Berkshire Lane, Suite 200

Tarpon Springs, Florida 34688

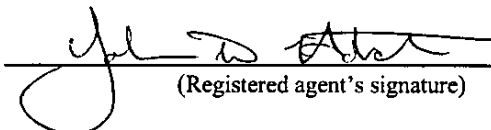
(City)

(Zip code)

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SECRETARY OF STATE  
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)

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

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

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

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

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

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

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

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

**B. OFFICERS**

President: See Attached

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. Marlene M Kernan  
(Signature of Director or Officer listed in number 12 of the application)

14. Marlene Kernan, President  
(Typed or printed name and capacity of person signing application)

## **MONUMENT AGENCY, INC.**

### **Officers, Directors & Stockholders**

Marlene M. Kernan  
***President, Secretary, Director***  
***12.5% Stockholder***  
1310 Utica Street  
Oriskany, NY 13424

Anthony Frank Martin  
***37.5% Stockholder***  
113 Cider Street  
Oriskany, NY 13424

Martin James Kernan  
***12.5% Stockholder***  
57 Whitney Ave.  
Floral Park, NY 11001

Ryan Matthew Kernan  
***12.5% Stockholder***  
1310 Utica Street  
Oriskany, NY 13424

Adam Michael Kernan  
***12.5% Stockholder***  
1310 Utica Street  
Oriskany, NY 13424

Michele Elizabeth Kernan  
***12.5% Stockholder***  
1310 Utica Street  
Oriskany, NY 13424

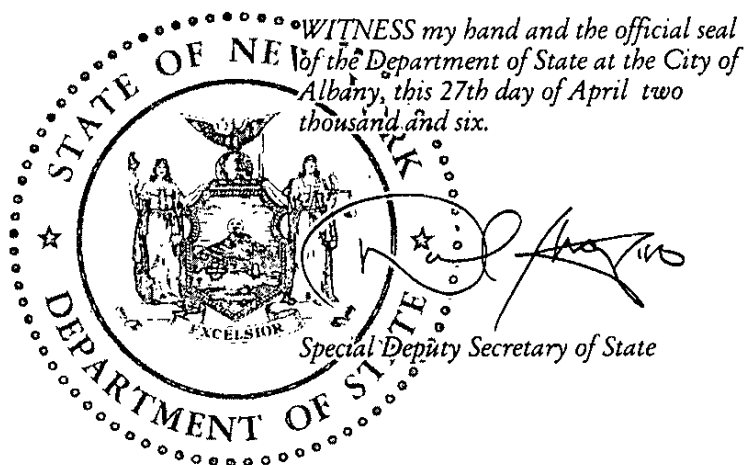
**State of New York**  
**Department of State** } ss:

MAY 03 2006

I hereby certify, that the Certificate of Incorporation of MONUMENT AGENCY, INC. was filed on 05/10/1993, under the name of ORISKA INSURANCE AGENCY, INC., with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

A Certificate of Amendment ORISKA INSURANCE AGENCY, INC., changing its name to MONUMENT AGENCY, INC., was filed 12/09/1994.

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