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(Re	equestor's Name)				
(Ac	ddress)					
(Ac	ddress)					
(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
(Ві	usiness Entity Na	me)				
(Do	ocument Number)				
Certified Copies	Certificate	es of Status				
Special Instructions to	Filing Officer:					
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06 JUN - 2 PH 3: 12 SECRETARY OF STATE FALLAHASSEE. FLORID

*** PROMPT ATTENTION REQUESTED ***

5/19/2006

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

Re: AP 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.

Hailey Overby

Hailey Overby Initial Licg. Spec.

Email: hoverby@kennedylicensing.com

cc: AP Insurance, Inc.

VICTRIX (FL), Reg. Agt.

Enc:

COVER LETTER

TO:	New Filing Section Division of Corporations
SUBJ	ECT: AP Insurance, Inc.
•	(Name of corporation - must include suffix)
Dear S	ir or Madam:
"Certif	iclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," ficate of Existence," and check are submitted to register the above referenced foreign corporation to business in Florida.
Please	return all correspondence concerning this matter to the following:
Haile	ey Overby
	(Name of Person)
Ken	nedy Licensing Service, Inc.
	(Firm/Company)
2501	Thomas Ave.
	(Address)
Dalla	as, TX 75201
	(City/State and Zip code)
For fur	rther information concerning this matter, please call:
Haile	ey Overby _{at (} 214 ₎ 855-0737
	(Name of Person) (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
Enclos	ed is a check for the following amount:
 \$70 .	00 Filing Fee \$\bigcup \\$78.75 Filing Fee & \bigcup \\$78.75 Filing Fee & \bigcup \\$87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy 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.	_{1.} AP Insurance, 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	Massachu	•		20-0708459					
	(State or country t	under the law of which it is incorporated)	. J.	(FEI number, if applicable)					
4	02/06/04	• •	5	Perpetual					
•	(Date	of incorporation),	٥.	(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	31 Milk Str	eet Boston, MA 02109	,,,,,	o <u>z, 1 100, 00 aotonimo ponimo</u> nacimo,					
(Principal office address)									
(Current mailing address)									
8. Nonresident Insurance Agency Sales & Service									
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)									
9.	9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)								
	Name:	John D. Hatch, Esquire		JUN AHA	T				
Oi	ffice Address:	1267 Berkshire Lane Sui	te	m					
		Tarpon Springs,		Florida 34688					
		(City)		(Zip code)	<u>ر</u>				
10	. Registered ag	ent'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: __ 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) 14. William Black, Jr., President

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

AP Insurance, Inc. Officers, Directors, Stockholders

AP Insurance LLC

100% Ownership 31 Milk Street; Suite 710 Boston, MA 02109

William Adams Black, Jr.

President 14 Hayden Circle Sudbury MA

Gary Brach

Treasurer 134 Dedham Street Dover, MA 02030

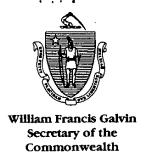
Steven Hauck

Secretary . 320 Western Ave Sherborn, MA 01770

Christopher Arnold

Asst. Secretary 70 Brownfield Drive Bridgewater, MA 02324

1321596.1



The Commonwealth of Massachusetts

Secretary of the Commonwealth

State House, Boston, Massachusetts 02133

March 9, 2006

TO WHOM IT MAY CONCERN:

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

AP INSURANCE, INC.

is a domestic corporation organized on **February 6, 2004**, 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.



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

William Travin Galicin

Secretary of the Commonwealth

Processed By: NEM