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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FOREIGN PROFIT/NONPROFIT CORPORATION**WALTER MORTENSEN INSURANCE, INC.**

Certificate of Status	0
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Page Count	04
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Electronic Filing Menu

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA

SECRETARY OF STATE
TALLAHASSEE, 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. Walter Mortensen Insurance, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ins.," "Co.," or "Corp.")

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

2. California 3. 95-1776948
(State or country under the law of which it is incorporated) (FBI number, if applicable)
4. 10/30/1953 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 4701 Stockdale Hwy. Bakersfield, CA 93309
(Principal office address)
- 4701 Stockdale Hwy. Bakersfield, CA 93309
(Current mailing address)

8. Sale of Insurance Products
(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: C T 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.

C T Corporation System

By:

(Registered agent's signature)

Denise Bell
Assistant Secretary

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:

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TALLAHASSEE, FLORIDA

A. DIRECTORS

Chairman: Harold L. Shultz, Jr.
Address: 1300 S. Mopac Expressway Austin, TX 78746

Vice Chairman: _____
Address: _____

Director: Von E. Brusax
Address: 1300 S. Mopac Expressway Austin, TX 78746

Director: Charles D. Jehl
Address: 1300 S. Mopac Expressway Austin, TX 78746

B. OFFICERS

President: Ronald Burcham
Address: 4701 Stockdale Hwy. Bakersfield, CA 93309

Vice President: Mark Heyne
Address: 4701 Stockdale Hwy. Bakersfield, CA 93309

Secretary: Nanci F. Tucker
Address: 1300 S. Mopac Expressway Austin, TX 78746

Treasurer: Charles D. Jehl
Address: 1300 S. Mopac Expressway Austin, TX 78746

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

13. _____
(Signature of Director or Officer listed in number 12 of the application)

14. Harold L. Shultz, Jr., Chairman of Board/CEO
(Typed or printed name and capacity of person signing application)

**State of California
Secretary of State**

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TALLAHASSEE, FLORIDA

**CERTIFICATE OF STATUS
DOMESTIC CORPORATION**

I, **BRUCE McPHERSON**, Secretary of State of the State of California, hereby certify:

That on the **30th day of October, 1953**, **WALTER MORTENSEN INSURANCE** became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; 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 June 1, 2006.



A handwritten signature in cursive script, appearing to read "Bruce McPherson".

BRUCE McPHERSON
Secretary of State