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Special Instructions to I	Filing Officer:	

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SUPPORTIVE INSURANCE

TO: Secretary of State

FROM: Karen Wimbley Supportive Insurance Services

Certificate of Authority Application

Enclosed you will find the necessary requirements to issue a Certificate of Authority. The certificate should be forwarded to:

Supportive Insurance Services, LLC 4207 E Flaningam Rd Bruceville IN 47516

If you require any additional requirements, please contact me at (812) 324-2256 or via email at kiwimbley@supportiveinservices.com

Enclosures

RE:

6/15/04 CR#5835 \$ 78:75

#### **COVER LETTER**

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

SUBJECT: The Settlement Group, Inc.

(Name of corporation - must include suffix)

Dear Sir or Madam:

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Contraction of the second seco 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:

### Karen Wimbley

(Name of Person)

## Supportive Insurance Services

(Firm/Company)

4207 E Flaningam Rd

(Address)

Bruceville IN 47516

(City/State and Zip code)

For further information concerning this matter, please call:

Karen Wimbley

(Name of Person)

at (<u>812</u>) <u>324-2256</u> (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 578.75 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

# The Settlement Group, 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. Maryland 41-2088082 (FEI number, if applicable) (State or country under the law of which it is incorporated)

4 03/27/2003

(Date of incorporation)

5. Perpetual

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

6. Upon Approval

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

6240 Old Dobbin Lane Ste 150 Columbia MD 21045

(Principal office address)

# 6240 Old Dobbin Lane Ste 150 Columbia MD 21045

(Current mailing address)

# 8 Insurance Agency Sales/Marketing

(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:	NRAI Services, Inc.		
Office Address:	2731 Executive Park Dr., Ste 4		
	Weston	, Florida 33331	
	(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.

(Registered agent's signature) DIANA Maldorado, ASST., Secy., of NRAI cate of existence duly authority.

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:	Jeffrey D Sussman		
Address: _	6240 Old Dobbin Lane Ste 150		
_	Columbia MD 21045		
Vice Chair.	man:		
		TAL	
Director:			
		SET O T	
_			
Director:			
		→. O	

## **B. OFFICERS**

President:	Jeffrey D Sussman				
Address:	6240 Old Dobbin Lane Ste 150				
	Columbia MD 21045				
Vice Presi	dent:				
Secretary:					
Treasurer:					
Address:					

NOTE:	If necessary,	you may attach an addendum to the application listing additional officers and/or directors.
	01X	
13.	YO U	,
		(Signature of Director or Officer listed in number 12 of the application)

14. Jeffrey D Sussman President

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

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301 West Preston Street, Baltimore, Maryland 21201 Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice Fax (410) 333-7097