

# F06000004607

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 205-0381

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5926

## FOREIGN PROFIT/NONPROFIT CORPORATION

EXP Insurance Agency, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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# 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. EXP Insurance 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. Missouri

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

3. 71-0952339

(FBI number, if applicable)

4. 09/16/2003

(Date of incorporation)

5. Perpetual

(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. 600 Corporate Park Drive, St. Louis, MO 63105

(Principal office address)

600 Corporate Park Drive, St. Louis, MO 63105 - Attn: Mark L Litow

(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: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

Florida 33324

(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:

*John J. Litow*  
(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:

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**A. DIRECTORS**Chairman: Andrew C. TaylorAddress: 600 Corporate Park Drive St. Louis, MO 63105-4211Vice Chairman: Donald L. RossAddress: 600 Corporate Park Drive St. Louis, MO 63105-4211Director: William W. SnyderAddress: 600 Corporate Park Drive St. Louis, MO 63105-4211Director: Lee R. KaplanAddress: 600 Corporate Park Drive St. Louis, MO 63105-4211**B. OFFICERS**President: Lee R. KaplanAddress: 600 Corporate Park Drive St. Louis, MO 63105-4211Vice President: Brich Thumann - Asst. Vice President: William J. KellerAddress: 600 Corporate Park Drive St. Louis, MO 63105-4211Secretary: Mark I. Litow - Asst. Secretary: William W. SnyderAddress: 600 Corporate Park Drive St. Louis, MO 63105-4211Treasurer: William W. SnyderAddress: 600 Corporate Park Drive St. Louis, MO 63105-4211

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. Mark I. Litow, Secretary  
(Typed or printed name and capacity of person signing application)FILED  
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SECRETARY OF STATE

# STATE OF MISSOURI



Robin Carnahan  
Secretary of State

**CORPORATION DIVISION  
CERTIFICATE OF GOOD STANDING**

I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

**EXP INSURANCE AGENCY, INC.  
00541121**

was created under the laws of this State on the 15th day of September, 2003, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 7th day of July, 2006

A handwritten signature in cursive script, reading "Robin Carnahan".

Secretary of State

