Florida Department of State

Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000088452 3)))

H09000088452 3ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6384

From:
Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850)521-1000
Fax Number : (850)558-1575

CORPORATION REINSTATEMENT

BROWN & BROWN OF COLORADO, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	~~$1,050.00~~

$450.00 - w/o penalty

Electronic Filing Menu Corporate Filing Menu Help

H09000088452 3

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
09 APR 14 PM 2:01

DOCUMENT # F06000004673

1. Corporation Name

Brown & Brown of Colorado, Inc.

REINSTATEMENT 07-09KS

CR2E081 (12/08)

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
1660 S. Albion Street	3101 W. Dr Martin Luther King Jr.
Suite, Apt. #, etc.: Suite 525	Suite, Apt. #, etc.: Suite 400
City & State: Denver, CO	City & State: Tampa, FL
Zip: 80222 Country: US	Zip: 33607 Country: US

4. Date Incorporated or Qualified To Do Business in Florida: 7/11/2006

5. FEI Number: 84-0837180 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $30.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable): 1201 Hays Street

Suite, Apt. #, Etc.:

City: Tallahassee State: FL Zip Code: 32301

☑ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0505, F.S.

Signature of Registered Agent: Joyce L. Markley Joyce L. Markley as its agent Date: 4/14/09

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
DP	Kenneth D. Kirk	2800 N. Central Avenue, Suite 1600	Phoenix, AZ 85004
V	Cory T. Walker	220 S. Ridgewood Avenue	Daytona Beach, FL 32114
VS	Laurel L. Grammig	3101 W. Dr Martin Luther King, #400	Tampa, Florida 33607
VAS	Thomas M. Donegan, Jr.	3101 W. Dr Martin Luther King, #400	Tampa, Florida 33607
T	Michele Sanders	2800 N. Central Avenue, Suite 1600	Phoenix, AZ 85004

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Thomas M. Donegan, Jr. V.P. 4/14/2009 813-222-4226

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

H09000088452 3