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PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name)	
(Document Number)		
Certified Copies	Certificates of S	Status
Special Instructions to Filing Officer:		
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	Office Use Only	



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*** PROMPT ATTENTION REQUESTED ***

8/16/2006

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

Re: Chas. M. Moore Insurance Agency, Incorporated

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.

Rhonda Reese

Rhonda Reese Sr Int'l & Ren Spec

Email: rreese@kennedylicensing.com

cc: Chas. M. Moore Insurance Agency, Incorporated

VICTRIX (FL), Reg. Agt.

Enc: App. in dup.,, Cert. G.S.

COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: Chas. M. Moore Insurance Agency, Incorporated (Name of corporation - must include suffix)				
Dear Sir or Madam:				
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:				
Rhonda Reese				
(Name of Person)				
Kennedy Licensing Service, Inc.				
(Firm/Company)				
2501 Thomas Avenue				
(Address)				
Dallas, TX 75201				
(City/State and Zip code)				
For further information concerning this matter, please call:				
Rhonda Reese 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				
Enclosed is a check for the following amount:				
\$70.00.Filing Fee \$\bigcup \\$78.75 \text{Filing Fee & }\bigcup \\$78.75 \text{Filing Fee & }\bigcup \\$78.75 \text{Filing Fee & }\bigcup \\$87.50 \text{Filing Fee,} \\ \text{Certificate of Status & }\text{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.

Į,	Chas. M. Moore Insurance Agency, Incombrated			
	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")			
	N/A			
	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)			
2.	Kentucky 3. 61-0607472			
	(State or country under the law of which it is incorporated) (FEI number, if applicable)			
4.				
	(Date of incorporation) (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.	1007 State St.			
	(Principal office address)			
	Bowling Green, KY 42101			
	(Current mailing address)			
8.				
	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)			
9.	Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)			
	Name: John D. Hatch, Esq.			
O:	ffice Address: 1267 Berkshire Lane, Suite 200			
	Tarpon Springs , Florida 34688			
	Tarpon Springs , Florida 34688 (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)

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:	OF FILED
A. DIRECTORS	OG AUG 21 PM 1:22
Chairman: See attached list	TALLAHARY OF CO.
Address:	OSEE ESTATE
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: SEE ATTACHED LIST	•
Address:	
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional additional actions are supplied to the application and additional actions are supplied to the applied to the application and additional actions are supplied to the applied to t	nal officers and/or directors.
13. WILL BOX	
(Signature of Director or Officer listed in number 12 of the approximation)	pplication)
14. W: NAME TO Adams, Jr. (Typed or printed name and capacity of person signing app	liantian
(1) begoin signing app	neadon)

Chas. M. Moore Insurance Agency, Incorporated Officers & Directors

Charles Minor Moore Director DOB - 03/16/1937

.. __._

1007 State Street Bowling Green, KY 42101

William Thomas Adams, Jr. President Director DOB - 04/26/1966

1007 State Street Bowling Green, KY 42101

Charles Moore Adams Vice-President Director DOB - 02/02/1971

1007 State Street Bowling Green, KY 42101

Felton Adams III Secretary DOB - 0/16/1973

1007 State Street Bowling Green, KY 42101



Trey Grayson Secretary of State

Certificate of Existence

I, Trey Grayson, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

CHAS. M. MOORE INSURANCE AGENCY, INCORPORATED

is a corporation duly incorporated and existing under KRS Chapter 271B, whose date of incorporation is October 16, 1963 and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that articles of dissolution have not been filed; and that the most recent annual report required by KRS 271B.16-220 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 30th day of May, 2006.



Ta62

Trey Grayson Secretary of State Commonwealth of Kentucky Tmorgan/0036206 - Certificate ID: 31728