

F06 000005944

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

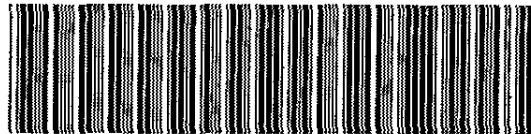
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch SEP 15 2006

# BUTLER REGULATORY CONSULTANTS, INC.

September 12, 2006

Florida Department of State  
New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Circle  
Tallahassee, FL 32301

DHL EXPRESS

## RE: W. BROWN & ASSOCIATES INSURANCE SERVICES, INC. CERTIFICATE OF AUTHORITY

Gentlemen:

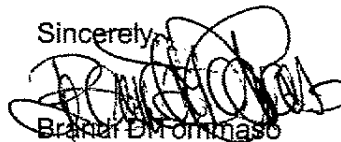
Please be advised that we assist W. Brown & Associates Insurance Services, Inc., with their regulatory requirements.

We are enclosing the following documents pertaining to the referenced:

1. Florida Cover Letter, in duplicate.
2. Application By Foreign Corporation For Authorization To Transact Business in Florida, in duplicate.
3. Certificate of Status issued by the California Secretary of State for W. Brown & Associates Insurance Services, Inc.
4. Check No. 22869 in the amount of \$78.75 representing the \$70.00 filing fee and \$8.75 representing the fee for the certificate of status.
5. Self addressed envelope for the return of the Certificate of Authority.

Please contact the undersigned with any questions.

Sincerely,



Brandon D. Montano

cc: W. Brown & Associates Insurance Services, Inc.



## COVER LETTER

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

**SUBJECT:** W. Brown & Associates Insurance Services, Inc.  
(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:

Brandi DiTommaso

(Name of Person)

Butler Regulatory Consultants, Inc.

(Firm/Company)

P.O. Box 2327

(Address)

La Habra, CA 90632-2327

(City/State and Zip code)

For further information concerning this matter, please call:

Brandi DiTommaso

(Name of Person)

at ( 562 ) 697-2035

(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

☐ \$78.75 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.*

1. W. Brown & Associates Insurance Services, 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. California 3. 33-0244534  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 07-13-1987 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 19000 MacArthur Boulevard, Suite 700 Irvine, CA 92612  
(Principal office address)

19000 MacArthur Boulevard, Suite 700 Irvine, CA 92612  
(Current mailing address)

8. Insurance Agency  
(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: CT 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.*

Donald H. Boadway  
(Registered agent's signature)

**Donald H. Boadway**  
**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.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: William Walter Brown

Address: 19000 MacArthur Boulevard, Suite 700

Irvine, CA 92612

Vice Chairman: N/A

Address: \_\_\_\_\_

Director: William Walter Brown

Address: 19000 MacArthur Boulevard, Suite 700

Irvine, CA 92612

Director: William Scott Brown

Address: 19000 MacArthur Boulevard, Suite 700

Irvine, CA 92612

B. OFFICERS

President: William Scott Brown

Address: 19000 MacArthur Boulevard, Suite 700

Irvine, CA 92612

Vice President: Vincent Hugh Zimmerer, Jr.

Address: 19000 MacArthur Boulevard, Suite 700

Irvine, CA 92612

Secretary: Thomas Franklin Bussard

Address: 19000 MacArthur Boulevard, Suite 700 Irvine, CA 92612

Treasurer: Thomas Franklin Bussard

Address: 19000 MacArthur Boulevard, Suite 700 Irvine, CA 92612

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

13. William Walter Brown  
(Signature of Director or Officer listed in number 12 of the application)

14. William Walter Brown, Chairman/Director  
(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

State of California  
Secretary of State

**CERTIFICATE OF STATUS  
DOMESTIC CORPORATION**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

That on the **13th day of July, 1987, W. BROWN & ASSOCIATES INSURANCE SERVICES** 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 August 11, 2006.



BRUCE McPHERSON  
Secretary of State

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