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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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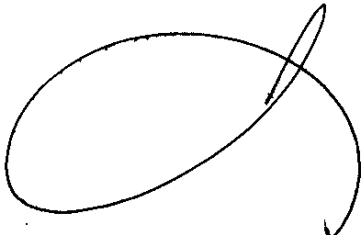


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2006 OCT 16 PM 11:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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# LAL

*LUSO - AMERICAN LIFE*  
*INSURANCE SOCIETY*

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October 10, 2006

Florida Secretary of State  
New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Dear Sir or Madam:

This letter is in regards to our application for a Certificate of Authority to do business in the State of Florida. One of the items required by the Florida Office of Insurance Regulation is the Certificate of Status from the Florida Secretary of State's Office.

Enclosed are the following items:

- \* Cover letter
- \* Application
- \* Certificate of Authority
- \* Certificate of Compliance
- \* Check (\$78.75)

Note: The State of California does not issue Certificates of Existence. They issue Certificates of Authority and Certificates of Compliance. I have enclosed both certificates duly authenticated.

Please contact me with any questions and thank you for your assistance in this matter.

Sincerely,

J. Larry Soares, FIC  
Vice-President/Secretary

Enclosures

## COVER LETTER

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

**SUBJECT:** Luso-American Life Insurance Society, Incorporated  
(Name of Corporation – must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

J. Larry Soares  
(Name of Person)

Luso-American Life Insurance Society  
(Firm/Company)

7080 Donlon Way, Suite #200

(Address)

Dublin, CA 94568  
(City/State and Zip Code)

For further information concerning this matter, please call:

J. Larry Soares at ( 925 ) 828-4884  
(Name of Person) (Area Code & Daytime Telephone Number)

**MAILING ADDRESS:**  
New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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 NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO  
CONDUCT ITS AFFAIRS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN  
THE STATE OF FLORIDA:*

1. Luso-American Life Insurance Society, Incorporated  
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
2. California, U.S.A. 3. 94-0401313  
(State or country under the law of which it is incorporated) (FBI number, if applicable)
4. July 1957 5. Perpetual  
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. N/A  
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S., to determine penalty liability.)
7. 7080 Donlon Way, Suite #200  
(Principal office address)
- Dublin, CA 94568  
(Current mailing address)

8. Fraternal Benefit Society Life Insurance products  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

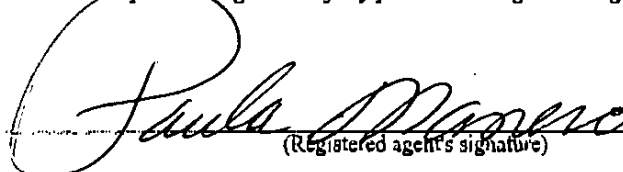
Name: Paula M. Marrero

Office Address: 12024 Still Meadow Drive

Clermont Florida 34711  
(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.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

Chairman: Albert Vieira  
1962 Liberty Street  
Address: Santa Clara, CA 95050

Vice Chairman: Edite Furtado  
201 Common Street  
Address: Quincy, MA 02169

Director: (see attached addendum)  
Address: \_\_\_\_\_

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

**B. OFFICERS**

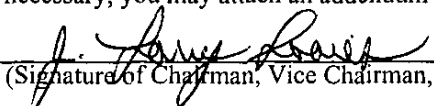
President: Frank X. Souza, Jr.  
Address: 4217 St. Andrews Street  
Stockton, CA 95219

Executive Vice President: CEO Manuel A. Minhoto  
Address: 7080 Donlon Way, Suite #200  
Dublin, CA 94568

Secretary: J. Larry Soares  
7080 Donlon Way, Suite #200  
Address: \_\_\_\_\_

Treasurer: Donalda de Melo  
Address: 7080 Donlon Way, Suite #200  
Dublin, CA 94568

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

13.   
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. J. Larry Soares, Vice-President/Secretary  
(Typed or printed name and capacity of person signing application)

Board of Directors  
Luso-American Life Insurance Society

Albert Vieira, Chairman

Frank X. Souza, Jr., President

Edite Furtado, Vice-Chair

Manuel A. Minhoto, Executive  
Vice-President/CEO

Carlos Amaral  
25152 Underwood Way  
Hayward, CA 94545

Jose da Costa  
10 Kathleen Drive  
Warren, RI 02885

Jose da Silva  
324 Saville Road  
Mineola, NY 11501

Hermano de Melo  
7 Conant Road, Unit #60  
Winchester, MA 01890

John M. Dias  
6390 Marquerite Drive  
Newark, CA 94560

Narcie Ferreira  
5041 Paddock Place  
Alta Loma, CA 91737

Jose M. Figueiredo  
15 Lark Drive  
Hudson, MA 01749

Michelle Machado Moreira  
381 Medford Street  
Somerville, MA 02145

Luis Nunes  
650 N. Palm Street  
Tulare, CA

Fee \$18.00

**STATE OF CALIFORNIA**  
**DEPARTMENT OF INSURANCE**  
**SAN FRANCISCO**

**Certificate of Compliance**

I, Pauline D'Andrea, on behalf of the Insurance Commissioner of the State of California, do hereby certify that:

Luso-American Life Insurance Society

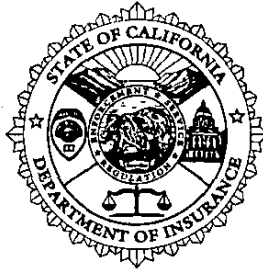
of Dublin, California, is duly organized by the Insurance Commissioner of the State of California and is hereby authorized to transact business within the State of California as a FRATERNAL BENEFIT SOCIETY.

That such certificate currently is in full force and effect; and that said certificate is expressly conditioned upon the holder hereof now and hereafter being in full compliance with all, and not in violation of any, of the applicable laws of the State of California as long as such laws and requirements are in effect and applicable, and as such laws and requirements now are, or may hereafter be changed or amended.

IN WITNESS WHEREOF, I have hereunto set my hand and caused the official seal of the Insurance Commissioner to be affixed this 13th day of September, 2006.

John Garamendi  
Insurance Commissioner

By *Pauline D'Andrea*  
Pauline D'Andrea



STATE OF CALIFORNIA  
DEPARTMENT OF INSURANCE  
SAN FRANCISCO

I, Pauline D'Andrea, on behalf of the Insurance Commissioner of the State of California, do hereby certify that the attached **No. F 190, Amended Certificate of Authority (Fraternal), Issued to Luso-American Life Insurance Society, dated August 17, 1993**, is a true and correct copy of the record on file with the Department of Insurance.

Witness my hand and the seal of the  
Insurance Commissioner of the State of  
California this 13th day of September, 2006.

John Garamendi  
Insurance Commissioner

By

*Pauline D'Andrea*

Pauline D'Andrea



Nº F 190

STATE OF CALIFORNIA  
DEPARTMENT OF INSURANCE  
SAN FRANCISCO

Amended

Certificate of Authority  
(Fraternal)

THIS IS TO CERTIFY That, pursuant to the provisions of Chapter 10, Part 2, Division 2 of the Insurance Code of the State of California

Luso-American Life Insurance Society

of Dublin, California organized under the  
laws of California, subject to its Articles of Incorporation  
and its Constitution and By-Laws or its other fundamental organizational documents, is hereby authorized to transact business within the State of California as a FRATERNAL BENEFIT SOCIETY.

THIS CERTIFICATE is expressly conditioned upon the holder hereof now and hereafter being in full compliance with all, and not in violation of any, of the applicable laws and lawful requirements