

FD600000 6685

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

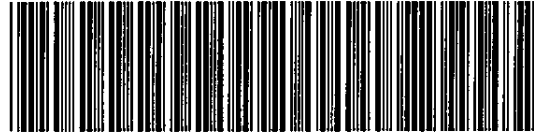
(Document Number)

Certified Copies _____

Certificates of Status _____

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09/29/06--01044--004 **78.75

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06 OCT 23 PM 12:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. WHITE OCT 24 2006



CHUBB LICENSING SERVICES LLC

15 Mountain View Road, P.O. Box 1615, Warren, New Jersey 07061-1615 • T: 800 824-6717 F: 908 903-4245

September 28, 2006

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: NONRESIDENT AGENT'S LICENSE
STATE OF FLORIDA

Please register Brown & Brown Insurance of Nevada, Inc. that the organization can transact business in the state of Florida Enclosed are the following:

1. Cover Letter
2. Application By Foreign Corporation For Authorization to Transact Business in Florida
3. Certificate of Existence
4. Chubb Licensing Services check in the amount of \$78.75

Thank you for your cooperation.

Tonda Pratt
Licensing Associate
Chubb Licensing Services LLC
(908) 903-2486

Encl.

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Brown & Brown Insurance of Nevada, 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:

Tonda Pratt

(Name of Person)

Chubb Licensing Services

(Firm/Company)

15 Mountain View Rd.

(Address)

Warren NJ 07059

(City/State and Zip code)

For further information concerning this matter, please call:

Tonda Pratt

(Name of Person)

at (908) 903-2484

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 29, 2006

TONDA PRATT
15 MOUNTAIN VIEW RD
WARREN, NJ 07059

SUBJECT: BROWN & BROWN INSURANCE OF NEVADA, INC.
Ref. Number: W06000042960

We have received your document for BROWN & BROWN INSURANCE OF NEVADA, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6933.

Dale White
Document Specialist

Letter Number: 706A00058136

**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. Brown & Brown Insurance of Nevada, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

Brown + Brown Las Vegas, Inc.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Nevada

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

3. 88-480358 88-0480358

(FEI number, if applicable)

4. 12/6/2000

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. _____

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

7. 2340 Corporate Circle 2nd floor Henderson, NV 89074-7732

(Principal office address)

2340 Corporate Circle 2nd floor Henderson, NV 89074-7732

(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)

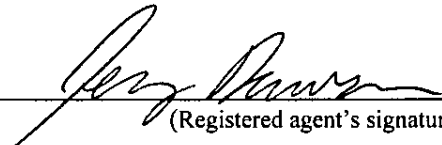
Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(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.

 Asst. V.P.
(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 business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Kenneth D Kirk

Address: 2340 Corporate Circle 2nd floor Henderson, NV 89074

Vice Chairman: No Title Assigned

Address: _____

Director: No Title Assigned

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: William K Walton

Address: 2340 Corporate Circle 2nd floor Henderson, NV 89074

Vice President: Michelle Sanders

Address: 2340 Corporate Circle 2nd floor Henderson, NV 89074

Secretary: No Title Assigned

Address: _____

Treasurer: No Title Assigned

Address: _____

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. _____

(Typed or printed name and capacity of person signing application)

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06 OCT 23 PM 12:40
CLERK OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE



FILED
06 OCT 23 PM 12:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **BROWN & BROWN INSURANCE OF NEVADA, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since December 6, 2000, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on October 3, 2006.



A handwritten signature in cursive script that reads "Dean Heller".

DEAN HELLER
Secretary of State

Electronic Certificate
Certificate Number: C20061003-0654
You may verify this electronic certificate
online at <http://secretaryofstate.biz/>

**Nevada
License Certification
Prepared For Florida**

BROWN & BROWN INSURANCE OF

Alice A. Molasky-Arman, Commissioner

Nevada Division of Insurance

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BROWN & BROWN INSURANCE OF NEVADA INC
2340 CORPORATE CR 2ND FLOOR
HENDERSON NV 89074

Date: September 14, 2006

The entity or individual shown above is licensed as follows:

License Type	Qualification	Effective Date	Expiration Date	License Number
Resident Producer Firm		10-01-2001	09-01-2007	10244
	Casualty	08-13-2001		
	Health	08-13-2001		
	Life	08-13-2001		
	Property	08-13-2001		
	Surety	08-13-2001		
License Type	Qualification	Effective Date	Expiration Date	License Number
Res. Surplus Lines Broker		08-13-2001	09-01-2007	10246

Nevada License Certification Prepared For Florida

This letter certifies that on the date it was produced the referenced licensee was actively licensed by the Nevada Division of Insurance for the license type indicated. The licensee was in good standing unless otherwise indicated.

All agents, brokers and consultants must complete prelicensing education and pass a written examination prior to being licensed. 30 hours of continuing education is required at renewal.

This is an official certification issued by the State of Nevada and is valid without signature and seal.