

FO70000002324

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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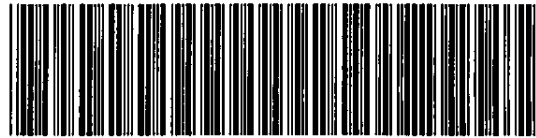
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

MRS
5/2

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Peterson McGregor & Associates, 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:

Deanna Stanley

(Name of Person)

Kennedy Licensing Service, Inc.

(Firm/Company)

3878 Oak Lawn Ave., Suite 210

(Address)

Dallas, TX 75219

(City/State and Zip code)

For further information concerning this matter, please call:

Deanna Stanley

(Name of Person)

at (214) 855-0737

(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. Peterson McGregor & Associates, 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. Michigan 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 5/24/02 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 0 / A
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1368 Business Park Drive Traverse City, MI 49686
(Principal office address)

1368 Business Park Drive Traverse City, MI 49686
(Current mailing address)

8. Nonresident insurance agency sales and service
(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)

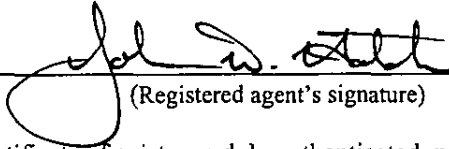
Name: John D. Hatch, Esquire

Office Address: 1267 Berkshire Lane, Suite 200
Tarpon Springs, Florida 34688
(City) (Zip code)

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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:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: SEE ATTACHED LIST

Address: _____

Vice President: _____

Address: _____

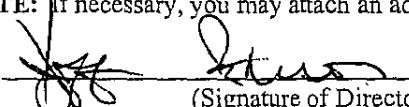
Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13.  _____
(Signature of Director or Officer listed in number 12 of the application)

14. Jeff S. Peterson, President _____
(Typed or printed name and capacity of person signing application)

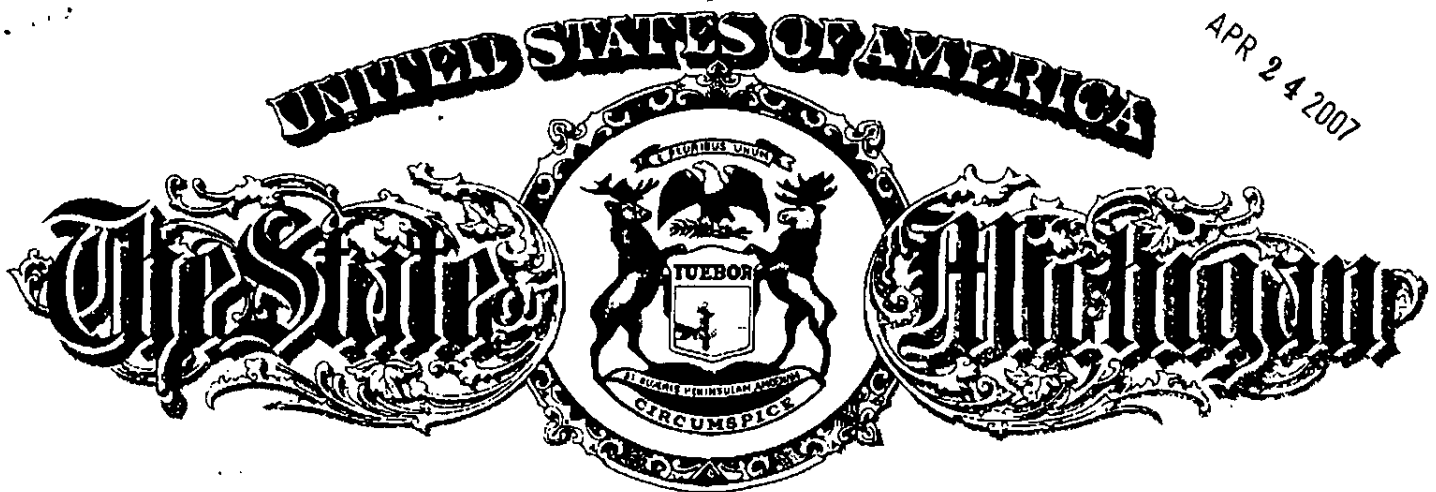
PETERSON MCGREGOR & ASSOCIATES, INC.
STOCKHOLDERS / OFFICERS

Jeff S. Peterson
47% Stockholder
President / Treasurer
9050 Cohodas Road
Empire, MI 49630

Steve W. McGregor
33% Stockholder
Vice President / Secretary
6220 E. Sparling Road
Kingsley, MI 49649

Dennis J. Muth
10% Stockholder / Owner
8748 Hodge Road
Kingsley, MI 49649

Donn S. Westman
10% Stockholder / Owner
4060 Holiday North Court
Traverse City, MI 48686



APR 24 2007

Michigan Department of Labor & Economic Growth

Lansing, Michigan

This is to Certify That

PETERSON MCGREGOR & ASSOCIATES, INC.

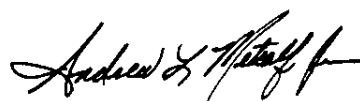
a Michigan profit corporation was validly incorporated on May 24, 2002, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

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TALLAHASSEE, FLORIDA

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 17th day of April, 2007.

 , Director

Bureau of Commercial Services