

F07888006289

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

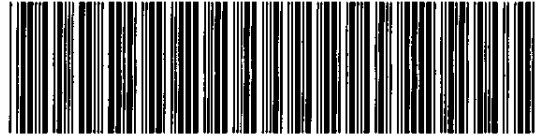
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



900113331289

12/24/07--01041--004 \*\*70.00

FILED

2007 DEC 24 P 3:20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12-26-07  
CO-98-81  
23



December 20, 2007

**FILED**  
2007 DEC 24 P 3:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Katina B. Simmons**  
Direct Phone 770-952-0200 ext. 6320  
Direct Fax 678-569-1855  
ksimmons@aainsco.com

Florida Department of State  
Division of Corporation  
PO Box 6327  
Tallahassee, FL 32314

**Re: Application for Certificate of Authority**

To Whom It May Concern:

Enclosed herewith please find a completed Certificate of Authority application for TW Partners Agencies of Alabama, Inc. and the applicable fees for payment.

If you have any questions or concerns, please feel free to contact me at anytime.

Sincerely,

A handwritten signature in black ink, appearing to read 'Katina Simmons', is written over the typed name and title.

Katina Simmons  
Compliance Manager  
AssuranceAmerica Corporation

**COVER LETTER**

**FILED**  
2007 DEC 24 P 3:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**SUBJECT:** TW Partners Agency of Alabama, 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:

Katina Simmons

(Name of Person)

AssuranceAmerica Corporation

(Firm/Company)

5500 Interstate North Parkway Suite 600

(Address)

Atlanta, Georgia 30328

(City/State and Zip code)

For further information concerning this matter, please call:

Katina Simmons

(Name of Person)

at ( 770 ) 952-0200 ext. 6320

(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. TW Partners Agency of Alabama, 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. Georgia

3. 20-8072643

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

(FEI number, if applicable)

4. 12/14/2006

5. Perpetual

(Date of incorporation)

(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. 5500 Interstate North Parkway Suite 600 Atlanta, GA 30328

(Principal office address)

5500 Interstate North Parkway Suite 600 Atlanta, GA 30328

(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: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

, Florida 33324

(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.*

C T Corporation System

By: \_\_\_\_\_

(Registered agent's signature)

Jennifer F. Aultman  
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.

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

FILED  
2007 DEC 24 P 3:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED  
2007 DEC 24 P 3:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**A. DIRECTORS**

Chairman: Guy Millner

Address: 5500 Interstate North Parkway Suite 600  
Atlanta, GA 30328

Vice Chairman: \_\_\_\_\_

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

Director: Lawrence (Bud) Stumbaugh

Address: 5500 Interstate North Parkway Suite 600  
Atlanta, GA 30328

Director: Mark Hain

Address: 5500 Interstate North Parkway Suite 600  
Atlanta, GA 30328

**B. OFFICERS**

President: James Bohanan

Address: 141 Troy Plaza Loop  
Troy, AL 36081

Vice President: Joseph Skruck

Address: 5500 Interstate North Parkway Suite 600  
Atlanta, GA 30328

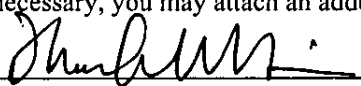
Secretary: Mark Hain

Address: 5500 Interstate North Parkway Suite 600 Atlanta, GA 30328

Treasurer: Richard Dotson

Address: 5500 Interstate North Parkway Suite 600 Atlanta, GA 30328

**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. Mark Hain - General Counsel, Secretary, Sr. Vice President  
(Typed or printed name and capacity of person signing application)

# STATE OF GEORGIA

## Secretary of State

Corporations Division  
315 West Tower  
#2 Martin Luther King, Jr. Dr.  
Atlanta, Georgia 30334-1530

FILED  
2007 DEC 24 P 3:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## CERTIFICATE OF EXISTENCE

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

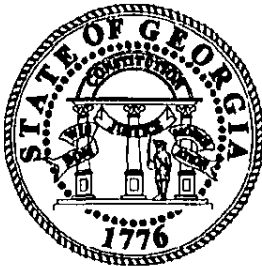
### **TW PARTNERS AGENCIES OF ALABAMA, INC.**

#### **Domestic Profit Corporation**

was formed or was authorized to transact business on 12/14/2006 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 29th day of November, 2007

Karen C Handel  
Secretary of State