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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
	Office Use On	ly



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SECRETARY OF STATE
TALL AHASSEE, FLORIDA

BOSSO MAR 7 9888

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Homeshield Insurance Co.
(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:
Heather Reeves
(Name of Person)
Homeshield Insurance Co.
(Firm/Company)
501 NW Grand Blvd
(Address)
Oklahoma City OK 73118
(City/State and Zip code)
For further information concerning this matter, please call: Heather Reeves at (405) 767-7201
(Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building Cloft Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount: MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Tallahassee, FL 32301
\$70.00 Filing Fee \$\sqrt{\sq}}}}}}}}}}}}} \end{\sqrt{\sq}}}}}}}}}}} \end{\sq\sintitexet{\sqrt{\sqrt{\sqrt{\sqrt{\sinteq}}}}}}}}} \end{\sqin{\sqrt{\sq}}}}}}}}} \end{\sq\sintitexet{\sqrt{\sinteq}}}}}}}}} \e

Burch, Tim

From:

Smith, Sarah

Sent:

Thursday, March 06, 2008 4:16 PM

To:

DOSALL

Subject: Non-Business Files

To All-

Please remember that all files stored on your "G:\" drives are backed up to tape nightly and are archived per Department protocols. These business files are mixed in with peoples personal files. So the Department is storing on the server, and then storing onto tape, copies of your music CD's, wedding and vacation pictures, and other non-business material.

Please remove all non-business files from the department servers immediately.

If you need assistance in copying information off of the server and onto CD's, or DVD's, so that you can continue to have access to the non-business material, please contact either your IT support person or Service Request and we will help you as resources allow.

Sarah L. Smith

Chief Information Officer

Chief, Departmental Operations and Technical Support Florida Department of State

(850) 245-6145

(850) 922-3017 Fax

SSmith@DOS.State.FL.US

Please take a few minutes to provide feedback on the quality of service you received from our staff. The Florida Department of State values your feedback as a customer. Kurt Browning, Florida's Secretary of State, is committed to continuously assessing and Improving the level and quality of services provided to you. Simply click on the link to the "DOS Customer Satisfaction Survey." Thank you in advance for your participation. <u>DOS Customer Satisfaction Survey</u>



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.

_{I.} Homeshie	eld Insurance Co.			
(Enter name of c	corporation; must include "INCORPORATED corp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATION,"	_	
,, -				
(15	all ' Black and I		.	
		adopted for the purpose of transacting business in Florida))	
2. Oklahoma	under the law of which it is incorporated) 3.	73-1155182 (FEI number, if applicable)	_	
•	• '	<u> </u>	208	
4. April 28, 1	of incorporation) 5.	Perpetual (Duration: Year corp. will cease to exist or "perpetual")	- 3E	
(Date		(Duration: Year corp. will cease to exist or "perpetual")	- -	7
6	N/A	in Florida, if prior to registration)	- 슈 [_
		502, F.S., to determine penalty liability)	系 -5 足 -5 足	_
₇ 501 NW G	rand Blvd., Oklahoma City, 0	OK 73118 위치	£	
(Principal office address)				
P.O. Box 1	18223, Oklahoma City, OK 7	3154-0223		
(Current mailing address)				
A 00/1 9 L L L				
8. Acc/L&H I	r) of corporation authorized in home state or co	ountry to be corried out in state of Florida)	_	
•	·	,		
9. Name and stree	et address of Florida registered agent: (P.C	D. Box <u>NOT</u> acceptable)		
Name:	C T Corporation System			
Office Address:	1200 South Pine Island Rd			
	Plantation	, Florida 33324 (Zip code)		
	(City)	(Zip code)		
10. Registered as	gent's acceptance:			
Having been nam	ed as registered agent and to accept servi	ice of process for the above stated corporation at the		
		ment as registered agent and agree to act in this capa relative to the proper and complete performance of m		
	with and accept the obligations of my po		iy annesi	
-				

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.

(Registered agent's signature)

ACCEPTANCE OF APPOINTMENT

2008 MAR -5 PN 4: 25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RE: H

Homeshield Insurance Co.

Pursuant to Sections 48.091 and 607.0501, Florida Statutes, the undersigned acknowledges and accepts its appointment as registered agent of the above corporation and agrees to act in the capacity and to comply with the provisions of the Florida Business Corporation Act (1990) relative to keeping open the registered office at the address specified above. The undersigned is familiar with, and accepts the obligations of, Section 607.0505, Florida Statutes.

Dated:

1/31/2008

C T CORPORATION SYSTEM

 $By_{\underline{}}$

Jonathan L. Miles, Assistant Secretary 12. Names and business addresses of officers and/or directors:

A. DIRECTORS Chairman: PLEASE SEE ATTACHED		
Chairman: TELAGE GEE ATTACTIED	TALC:	
Address:	ARE NA	
	SS - 5	
Vice Chairman:	mo To	٦ 2 –
Address:		
	Dr. 25	
Director:		
Address:		
Director:		
Address:		
	,	
B. OFFICERS		
President: PLEASE SEE ATTACHED		
Address:		
Vice President:		
Address:		
Secretary:		
Address:		
Treasurer:		
Address:		
NOTE: If necessary, you may attach an addendum to the application l	isting additional officers and/or directors.	
13.		
13. Spinature of Director or Officer listed in number	er 12 of the application)	
Gary R. Peterson, President		

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

Officers and Directors:

Executive Vice President/**Director** Term Expires 3/2008 Served 6/24/82 - Present

President/**Director**Term Expires 3/2008
Served 8/13/84 - Present

Vice President Term Expires 3/2008

Treasurer/**Director**Term Expires 3/2008
Served 4/18/05 - Present

Secretary Term Expires 3/2008

Director Served 4/28/82 - Present

Director Served 8/15/82 - Present G. Jeffrey Records, Jr. 501 NW Grand Blvd Oklahoma City, OK 73118

Gary R. Peterson 501 NW Grand Blvd Oklahoma City, OK 73118

Todd A. Dobson 501 NW Grand Blvd Oklahoma City, OK 73118

Tim Tackett 501 NW Grand Blvd Oklahoma City, OK 73118

David D. Morgan 501 NW Grand Blvd Oklahoma City, OK 73118

George J. Records 501 NW Grand Blvd Oklahoma City, OK 73118

Nancy J. Records 501 NW Grand Blvd Oklahoma City, OK 73118

> ZOUR MAR -5 PN 4: 25 SECRETARY OF STATE



CERTIFICATE OF GOOD STANDING DOMESTIC FOR PROFIT CORPORATION INSURANCE

I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.

I FURTHER CERTIFY that <u>HOMESHIELD INSURANCE CO.</u> whose registered agent is <u>DAVID D. MORGAN</u>, <u>%LEGAL DEPT</u>, with its registered office at <u>501 W INTERSTATE 44 RD OKLA CITY</u>. Oklahoma is a <u>Domestic For Profit Corporation Insurance</u> duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.



IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this 22nd day of February, 2008.

Secretary Of State

M. hisan horge