

F08000002165

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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2008 MAY 12 P 12:53

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**COVER LETTER**

**FILED**  
2008 MAY 12 P 12:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**SUBJECT:** American Fidelity Financial Services 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:

Steven L Garcia

(Name of Person)

American Fidelity Financial Services Inc

(Firm/Company)

4945 Van Dyke Rd

(Address)

Lutz FL 33558

(City/State and Zip code)

For further information concerning this matter, please call:

Brett Ewald

(Name of Person)

at ( 813 ) 625-2683

(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. **American Fidelity Financial Services 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. **Illinois** 3. **36-3923175**

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

(FEI number, if applicable)

4. **November 17, 1993**

5. **Perpetual**

(Date of incorporation)

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

6. **NA**

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. **4945 Van Dyke Rd Lutz FL 33558**

(Principal office address)

**4945 Van Dyke Rd Lutz FL 33558**

(Current mailing address)

8. **Mortgage Banker**

(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: **Brett Ewald**

Office Address: **4949 Van Dyke Rd**

**Lutz**

(City)

, Florida **33558**

(Zip code)

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TALLAHASSEE, FLORIDA

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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: NA

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

Vice Chairman: NA

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

Director: NA

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

Director: NA

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

**B. OFFICERS**

President: Steven L Garcia

Address: 5001 Newport Dr

Rolling Meadows IL 60008

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)

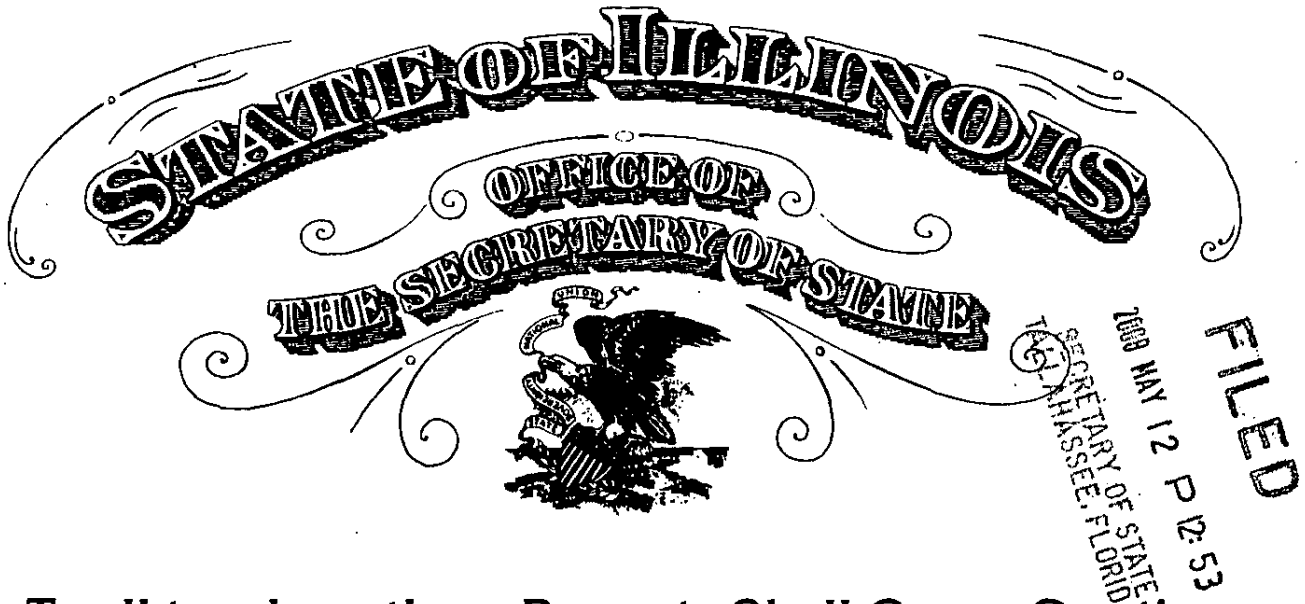
14. \_\_\_\_\_

Steven Garcia President

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

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2000 MAY 12 P 12:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

File Number 5755-637-4



*To all to whom these Presents Shall Come, Greeting:*

*I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that*

AMERICAN FIDELITY FINANCIAL SERVICES, INC, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON NOVEMBER 17, 1993, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



*In Testimony Whereof, I hereto set  
my hand and cause to be affixed the Great Seal of  
the State of Illinois, this 7TH  
day of MAY A.D. 2008*

*Jesse White*

Authentication #: 0812801862

Authenticate at: <http://www.cyberdriveillinois.com>

SECRETARY OF STATE