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06/02/08--01017--001 **87.50

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SECKETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

SUBJECT: Insurance Scholarship Foundation of America (Name of Corporation - must include suffix)

New Filing Section Division of Corporations

TO:

Dear Sir or Madam:	
	on by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", ", and check are submitted to register the above referenced not for profit corporation to conduct
Please return all corresp	ondence concerning this matter to the following:
-	Nancy Noe-Nichols (Name of Person)
- -	Insurance Scholarship Foundation of America (Firm/Company)
	3637 Marsh Park Court
•	(Address)
	Jacksonville, F1 32250
•	Jacksonuille, FL 32250 (City/State and Zip Code)
For further information	concerning this matter, please call:
Nancy Noe-N (Name	of Person) at (866) 379-4732 (Area Code & Daytime Telephone Number)
MAILING AD New Filing Sec Division of Cor P.O. Box 6327 Tallahassee, FL	tion New Filing Section porations Division of Corporations Clifton Building
Enclosed is a check for	the following amount:
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Sertificate of Status Certified Copy \$87.50 Filing Fee, Certificate of Status & Certified Copy \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 2, 2008

NANCY NOE-NICHOLS INSURANCE SCHOLARSHIP FOUNDATION OF AMER 3637 MARSH PARK COURT JACKSONVILLE, FL 32250

SUBJECT: INSURANCE SCHOLARSHIP FOUNDATION OF AMERICA

Ref. Number: W08000026801

We have received your document for INSURANCE SCHOLARSHIP FOUNDATION OF AMERICA and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the corporation must contain a corporate suffix. This suffix may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

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) 245-6934.

Loria Poole Regulatory Specialist II

Letter Number: 308A00034294



July 17, 2008

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Subject: Insurance Scholarship Foundation of America, Inc.

Ref. Number: W08000026801

We have received your letter date 6/2/2008 requesting additional information on the application by foreign not for profit corporation for authorization to conduct affairs in Florida. ISFA is incorporated pursuant to regulations in the State of Oklahoma.

A Certificate of Good Standing from the State of Oklahoma is also attached per your request. We are also returning previous documentation along with our check for \$87.50.

If further information is required for the requested filing, please call 866 379 4732.

Thank you,

Nandy Noe-Nichols Executive Director

3637 Marsh Park Court Jacksonville, Florida 32250

'APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

Thsurance Scholarship Foundation of America (Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbi import in language as will clearly indicate that it is a corporation instead of a natural person or partnership in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.	reviations of like if not so contained on.)
2. OKLAHOMA (State or country under the law of which it is incorporated) 4. 7/8/1993 (Date of Incorporation) (Duration: Year corp. will cease to exist of the control of the corporation)	
6. (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S, to determ	nine penalty iability.)
P. D. Box 866, Hendersonville, NC 28793-0	866
Provide scholarships to men + women either work 8. Insurance Industry or college students pursuing a (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)	ing in <u>Career</u> in insurance
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Name: Noe - Nichols	JUL 21 A
Office Address: 3637 Marsh Park Court Tacksonulle, Florida 32250 (City) (Zip Code)	AM 8: 19 OF STATE E. FLORIDA

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.

Please see attached. 12. Names and addresses of officers and/or directors: A. DIRECTORS Chairman: Address: Vice Chairman: Address: Director: Director:__ Address:___ **B. OFFICERS** President: Vice President: Address: Secretary:___ Address:_ Treasurer:_ Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) Noe-Nichols Executive Director Chief Fiscal Officer (Typed or printed name and capacity of person signing application)

INSURANCE SCHOLARSHIP FOUNDATION OF AMERICA BOARD OF DIRECTORS 2008

Chairman of the Board

Curt Nichols, CPCU
Vice President
Liberty Mutual Agency Markets
9450 Seward Road
Fairfield, OH 45024

Vice Chairman

Paul D. Andrews

Sr. Vice President Corporate Services Division Horace Mann Companies 1 Horace Mann Plaza, G004 Springfield, IL 62715-0001

Secretary

Carole Shelton

Executive Director Independent Insurance Agents of Houston 2550 North Loop West, Suite 116 Houston, TX 77092

Executive Director/Chief Fiscal Officer:

Nancy Noe-Nichols, ARM, CPIW 3637 Marsh Park Court Jacksonville, FL 32250

Directors:

Robert J. (Bob) Cormican

SVP Compliance, Quality & Training Crawford & Company 1001 Summit Blvd.
Atlanta, GA 30319

Kirk A. Goeldner, CPCU

Managing Partner Conequity Resources, LLC 11 N. Irvine Street, Suite 9 Greenville, SC 29601 Elena K. Ifkovits, CISR, CPIW, DAE 126 Garfield Avenue

Palmyra, NJ 08065

Claudette Kenmir, CPCU, CIC, CPIW

VP, West Regional Executive Safeco Insurance Company 14123 Denver West Parkway Golden, CO 80401

Jeanine R. Kingeter, PHR

President HR Business Partners LLC 501 Bending Lane, 2nd floor King of Prussia, PA

Kim J. O'Conor, PMP

Strategic Program Manager, IT Zurich in North America 3910 Keswick Road, MD1-03-04 Baltimore, MD 21211

Ed Whitehead

Business Development Officer Imperial AI Credit 3015 Curry Woods Drive Orlando, FL 32822

Staff:

Administrative Manager:

Billie Sleet, CIC, CPIW 184 Haywood Knolls Drive Hendersonville, NC 28791

OFFICE OF THE SECRETARY OF STATE



CERTIFICATE OF GOOD STANDING CHARITABLE ORGANIZATION

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 INSURANCE SCHOLARSHIP FOUNDATION OF AMERICA whose registered agent is LOCATION, with its registered office at 184 HAYWOOD KNOLLS DR HENDERSONVILLE 28791 USA Oklahoma is a Charitable Organization 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 <u>26th</u>, day of <u>June</u>, <u>2008</u>.

Secretary Of State

M. husan lavage