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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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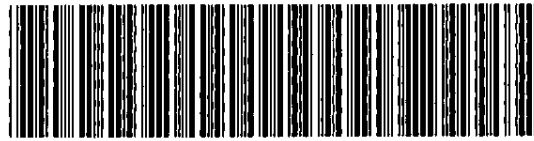
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Stivers JAN 15 2009

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Palmetto Surety Corporation

(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:

Mr. Sandy Fay

(Name of Person)

Colodny, Fass, Talenfeld, Karlinsky & Abate, P.A.

(Firm/Company)

100 SE 3rd Avenue, 23rd Floor

(Address)

Fort Lauderdale FL 33394

(City/State and Zip code)

For further information concerning this matter, please call:

Sandy Fay

(Name of Person)

at (954) 4010

(Area Code & Daytime Telephone Number)

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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. **Palmetto Surety Corporation**

(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. **South Carolina**

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

3. **61-1426051**

(FEI number, if applicable)

4. **February 2003**

(Date of incorporation)

5. **Perpetual**

(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. **126 Seven Farms Rd. Suite 170; Charleston, SC 29492**

(Principal office address)

126 Seven Farms Rd. Suite 170, Charleston, SC 29492

(Current mailing address)

8. **Surety Insurer**

(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: **Chief Financial Officer**

Office Address: **200 E. Gaines Street**

Tallahassee

(City)

, Florida **32314-6200**

(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: Mark Askew

Address: 126 Seven Farms Rd. Suite 170 Charleston, SC 29492

Vice Chairman: _____

Address: _____

Director: Craig Claxton

Address: 126 Seven Farms Rd. Suite 170 Charleston, SC 29492

Director: Brian Holden

Address: 126 Seven Farms Rd. Suite 170 Charleston, SC 29492

B. OFFICERS

President: David Hedrick

Address: 126 Seven Farms Rd. Suite 170 Charleston, SC 29492

Vice President: _____

Address: _____

Secretary: Scott Willis

Address: 126 Seven Farms Rd. Suite 170 Charleston, SC 29492

Treasurer: Scott Willis

Address: 126 Seven Farms Rd. Suite 170 Charleston, SC 29492

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

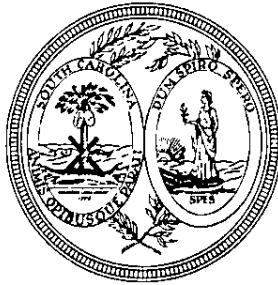
13. 

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

14. David Hedrick, President

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

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

PALMETTO SURETY CORPORATION,
a corporation duly organized under the laws of the State of South Carolina on November 8th, 2002, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the Corporation that it is subject to being dissolved by administrative action pursuant to section 33-14-210 of the South Carolina Code, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great
Seal of the State of South Carolina this
6th day of October, 2008.

A handwritten signature in cursive script that reads "Mark Hammond".
Mark Hammond, Secretary of State