

F09000001171

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

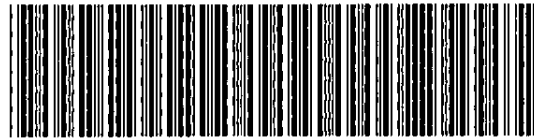
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
09 MAR 23 AM 11:16
CORPORATION STATE
DIVISION FLORIDA
TALLAHASSEE, FLORIDA
FILED
2009 MAR 23 AM 11:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J Shivers MAR 24 2009



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032
REFERENCE : 920713 7363511
AUTHORIZATION : [Signature]
COST LIMIT : \$ 70,00

ORDER DATE : March 11, 2009
ORDER TIME : 9:50 AM
ORDER NO. : 920713-030
CUSTOMER NO: 7363511

FOREIGN FILINGS

NAME: AFC INSURANCE, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Joyce Markley -- EXT# 2930

EXAMINER: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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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. AFC Insurance, 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. Pennsylvania 3. 232312976
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. June 9, 1995 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Upon Qualification
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 95 Highland Avenue, Suite 150, Bethlehem, PA 17017
(Principal office address)
3101 West Dr Martin Luther King Jr, Suite 400, Tampa, FL 33607
(Current mailing address)

8. To engage in all lines of insurance-related business as an insurance agent/broker.
(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: Corporation Service Company
Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(City) (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.

Corporation Service Company
By: Joyce L. Markley
(Registered agent's signature)
Assistant Vice President

Joyce L. Markley
as its agent

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: See attached officers/directors rider

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: See attached officers/directors rider

Address: _____

Vice President: _____

Address: _____

Secretary: _____

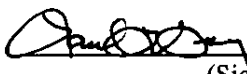
Address: _____

Treasurer: _____

Address: _____

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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. Laurel L. Grammig, Vice President
(Typed or printed name and capacity of person signing application)

OFFICERS/DIRECTORS RIDER

FL-Application by Foreign Corporation for Authorization

AFC Insurance, Inc.

List of Officers

Name: Cory T. Walker **Title:** Vice President

Bus. Addr.: 220 S. Ridgewood Avenue, Daytona Beach, FL 32114

Name: Dina Tristani **Title:** Vice President

Bus. Addr.: 95 Highland Avenue, Suite 150, Bethlehem, PA 18017

Name: Jane Gordon **Title:** Executive Vice President

Bus. Addr.: 95 Highland Avenue, Suite 150, Bethlehem, PA 18017

Name: Kenneth R. Masters **Title:** President

Bus. Addr.: 681 S. Parker Street, Suite 200, Orange, CA 92868

Name: Laurel L. Grammig **Title:** Vice President & Secretary

Bus. Addr.: 3101 W. Dr Martin Luther King, Suite 400, Tampa, FL 33607

Name: Thomas M. Donegan, Jr. **Title:** Vice President & Asst. Secreta

Bus. Addr.: 3101 W. Dr Martin Luther King, Suite 400, Tampa, FL 33607

Name: Thomas G. Tinsley **Title:** Treasurer

Bus. Addr.: 220 S. Ridgewood Avenue, Daytona Beach, FL 32114

Name: Patrick R. Cassaday **Title:** Vice President

Bus. Addr.: 95 Highland Avenue, Suite 150, Bethlehem, PA 18017

List of Directors

Name: Kenneth R. Masters **Term:**

Bus. Addr.: 681 S. Parker Street, Suite 200, Orange, CA 92868

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

MARCH 11, 2009

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

AFC INSURANCE, INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Pedro A. Cortis

Secretary of the Commonwealth