

**F09000001640**

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27



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

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TALLAHASSEE, FLORIDA

April 17, 2009

CORPORATION SERVICE COMPANY

**RESUBMIT**

Please give original  
submission date as file date.

SUBJECT: APEX INSURANCE AGENCY, INC.  
Ref. Number: W09000018080

We have received your document for APEX INSURANCE AGENCY, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation.

One or more major words may be added to make the name distinguishable.  
**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

Please return the corrected original and one copy of 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) 245-6995.

Wanda Cunningham  
Regulatory Specialist II  
New Filing Section

Letter Number: 709A00012946

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 956476 7363511

AUTHORIZATION

*[Signature]*

COST LIMIT : \$ 70.00

ORDER DATE : April 10, 2009

ORDER TIME : 3:32 PM

ORDER NO. : 956476-005

CUSTOMER NO: 7363511

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TALLAHASSEE, FLORIDA

FOREIGN FILINGS

NAME: APEX INSURANCE AGENCY, 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: \_\_\_\_\_

**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. Apex Insurance Agency, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

Apex Insurance Services, Inc.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Virginia

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

3. 59-1361106

(FEI number, if applicable)

4. 7/24/08

(Date of incorporation)

5. perpetual

(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. 301 Concourse Blvd., Ste. 100, Glen Allen, VA 23060

(Principal office address)

301 Concourse Blvd., Ste. 100, Glen Allen, VA 23060

(Current mailing address)

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8. 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)

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

**Joyce L. Markley**  
**as its agent**

By: Joyce L. Markley

(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: Anthony T. Strianese

Address: 303 Corporate Center Drive, Ste. 300, Stockbridge, GA 30281

Vice Chairman: \_\_\_\_\_

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

Director: \_\_\_\_\_

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

Director: \_\_\_\_\_

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

**B. OFFICERS**

President: Anthony T. Strianese

Address: 303 Corporate Center Drive., Ste. 300, Stockbridge, GA 30281

Executive

Vice President: Karl F. Sneider

Address: 301 Concourse Blvd., Ste. 100, Glen Allen, VA 23060

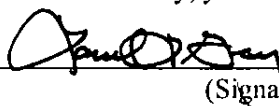
Secretary: Laurel L. Grammig

Address: 3101 W Martin Luther King Jr Blvd., Ste. 400, Tampa, FL 33607

Treasurer: Joseph S. Failla, Jr.

Address: 220 S. Ridgewood Ave., Daytona Beach, FL 32114

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)

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TALLAHASSEE, FLORIDA

# Commonwealth of Virginia



## State Corporation Commission

*I Certify the Following from the Records of the Commission:*

Apex Insurance Agency, Inc. is a corporation existing under and by virtue of the laws of Virginia, and is in good standing.

The date of incorporation is July 24, 2008.

Nothing more is hereby certified.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Signed and Sealed at Richmond on this Date:  
April 10, 2009*



*Joel H. Peck*  
Joel H. Peck, Clerk of the Commission