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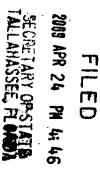
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### **COVER LETTER**

TO: New Filing Se Division of Co			
SUBJECT: Da	vidson-Babcock, Inc		
	(Name of corpora	ation - must include suffix	<u>.</u> )
Dear Sir or Madam:			
	tion by Foreign Corporation fore," and check are submitted torida.		
Please return all corres	pondence concerning this mat	ter to the following:	
Terry Hopkins			
	(Name	of Person)	
NCMIC Group,	Inc.		
	<del></del>	Company)	
14001 Universi	ty Avenue		
	(Ac	idress)	
Clive, Iowa 503	25-8258		
·		te and Zip code)	
For further information  Terry Hopkins	concerning this matter, please		t 4503
(Name of Pers		a Code & Daytime Telep	hone Number)
STREET/COI New Filing Sec Division of Co Clifton Buildin 2661 Executive Tallahassee, FI	rporations eg e Center Circle	MAILING A New Filing S Division of C P.O. Box 632 Tallahassee,	Section Corporations 27
Enclosed is a check for	the following amount:		
<b>√</b> \$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



APR 2 0 2009

April 14, 2009

TERRY HOPKINS 14001 UNIVERSITY AVE CLIVE, IA 50325-8258

SUBJECT: DAVIDSON-BABCOCK, INC.

Ref. Number: W09000017438

We have received your document for DAVIDSON-BABCOCK, 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 entity's date of incorporation/organization must be listed in the document.

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) 245-6928.

Letter Number: 809A00012501

Tim Burch Regulatory Specialist II

#### 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.

* *	n-Babcock, Inc. orporation; must include "INCORPORATE	ED," "COMPANY," "CORPORATION,"
	orp," "Inc," "Co," or "Corp.")	CHETARY 24
(If name unavaila	able in Florida, enter alternate corporate na	me adopted for the purpose of transacting business in Florida.
<sub>2.</sub> lowa		3. 26-4509320
	under the law of which it is incorporated)	(FEI number, if applicable)
4	3/19/2009	5. perpetual
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6		
		ss in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)
<sub>7.</sub> 14001 Un	iversity Avenue, Clive, IA 5	0325-8258
	(Principal office a	
14001 Un	iversity Avenue, Clive, IA 5	
	(Current mailing a	address)
8. Insurance	Agency	
		country to be carried out in state of Florida)
9. Name and stree	<u>t address</u> of Florida registered agent: (I	P.O. Box NOT acceptable)
Name:	National Registered Age	ents, Inc.
Office Address:	2731 Executive Park Driv	e Ste. 4
	Weston	, Florida 33331
	(City)	(Zip code)
10. Registered ag	ent's acceptance:	
Having been name designated in this further agree to co	ed as registered agent and to accept sei application, I hereby accept the appoir	rvice of process for the above stated corporation at the place ntment as registered agent and agree to act in this capacity. I s relative to the proper and complete performance of my duties, position as registered agent.
	MA JOIN C	IMISTER VOORNAME
_	(Registered agent's signatur	re)

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	7.0	№.
Chairman: Patrick McNerney	<u>Eng</u>	<b>3</b>
Address: 14001 University Ave., Clive, IA 50325	A	APR
	SSE VAN	24
Vice Chairman: Roger Schlueter	7	32
Address: 14001 University Ave., Clive IA 50325		9 <del>1</del> th
Director: Greg Cole		
Address: 14001 University Ave., Clive IA 50325		<del></del>
Director:		
Address:		
B. OFFICERS  President: Patrick McNerney  Address: 14001 University Avenue		
Clive, IA 50325-8258		
Vice President: Greg Cole		
Address: 14001 University Avenue		
Clive, IA 50325-8258		
Secretary: Roger Schlueter		
Address: 14001 University Avenue		
Treasurer: Roger Schlueter		
Address: 14001 University Avenue		
NOTE: If necessary, you may attach an addendum to the application listing additional officers	and/or directors.	
(Signature of Director or Officer listed in number 12 of the application)  14. Roger Schlueter		
(Typed or printed name and capacity of person signing application)		

## IOWA SECRETARY OF STATE MICHAEL A. MAURO



2089 APR 24 PN 44 46 SECHETARY OF STATE TALLAHASSEE, PLONDA

Date: 03/23/2009

#### **CERTIFICATE OF EXISTENCE**

Name: DAVIDSON-BABCOCK, INC. (490 DP - 377096)

Date of Incorporation: 3/19/2009

Duration: PERPETUAL

I, MICHAEL A. MAURO, Secretary of State of the State of Iowa, custodian of the records of incorporations, certify that the corporation named on this certificate is in existence and was duly incorporated under the laws of Iowa on the date printed above, that all fees required by the Iowa Business Corporation Act have been paid by the corporation, that the most recent biennial corporate report has been filed by the Secretary of State, and that articles of dissolution have not been filed.

Certificate ID: CS27064

To validate this certificate please visit the following web site and enter the certificate ID.

www.sos.state.ia.us/ValidateCertificate

MUGOLL A. MOULD

MICHAEL A. MAURO SECRETARY OF STATE