F09000002826

(Requestor's Name)				
(Address)				
(Address)				
,				
(City/State/Zip/Phone #)				
·				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Special instructions to Filing Officer.				

Office Use Only



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EP 7/16/09

W08000028652



June 19, 2009 .

KRISTY STARLING 111 N. RAILROAD GROESBECK, TX 76642

SUBJECT: RENAISSANCE INSURANCE AGENCY, INC.

Ref. Number: W09000028652

We have received your document for RENAISSANCE 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):

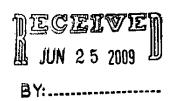
The entity's date of incorporation on the application number 4 must match the date on the certificate of existence.

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) 245-6062.

Eula Peterson Regulatory Specialist II

Letter Number: 709A00020912





June 15, 2009

Region Code 794

Florida Secretary of State Division of Corporations Corporate Filings 2661 Executive Center Circle Tallahassee, FL 32301

Ref: Application for Certificate of Authority

Dear Sir/Madam:

We are filing the following documents on behalf of Renaissance Insurance Agency, Inc

The items checked below are enclosed.

Application for Certificate of Authority
 Check #99250 \$ 70.00
 Certificate of Good Standing
 Articles of Incorporation

Should you need anything further, please do not hesitate to contact me.

Please return all filed documents to my attention.

Sincerely,

Kristy Starling

Kristy Starling
Licensing and Compliance Specialist
111 N. Railroad
Groesbeck, TX 76642
Ph: 254*729*6180

Fax: 254*729*8069

kstarling@licensing4insurance.com

31091

Fax: 254 729-8069

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.	Renaissance Insurance Agency, Inc					
	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")					
ı	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business i	n Flo	rida)			
2.	MA 3. 043243313 (State or country under the law of which it is incorporated) (FEI number, if applicable)					
((State or country under the law of which it is incorporated) (FEI number, if applicable)					
4.	8/15/1994 5. Perpetual					
	(Date of incorporation) 5. Perpetual (Duration: Year corp. will cease to exist or "pe	rpetu	al")			
6.	Upon Qualification $\overline{F}_{\mathcal{Q}_{2}}$) _	and the same		
-,	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)		<u> </u>	Employees University		
7.	981 Worcester Street		£-	# ************************************		
_	(Principal office address)	C.	=	¥ 1		
	Wellesley, MA 04282			Server Server		
_	(Current mailing address)	25. 25. 25. 26.	28			
8.						
	(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					
Of	ffice Address: 1201 Hays Street					
	Tailahassee , 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.

(Registered agent's signature)

William M. Edrington, Authorized Representative

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. DIRECTO	DRS	
Chairman: See	Attached List	
Address:		
vice Chairman:		
Address:		
Director:		
Address:		
Director:		
71441055.		
		7 8 T
B. OFFICERS	S	P. C.
President:		PSS 4
Address:		Mc 呈 门口
		DE O
Address:		
		·
Secretary:		
Address:		
Treasurer:		
Address:		
NOTE: If nece	essary, you may attach an addendum to the application listing addit	tional officers and/or directors.
13.	× Mauc Sulame	
	(Signature of Director or Officer listed in number 12 of the	application)
14		
	(Typed or printed name and canacity of person signing an	unlication)

Directors and Officers Rider Renaissance Insurance Agency, Inc 981 Worcester Street Wellesley, MA 04282 Phone: 7814319800 Fax: 7814310222

President

Bruce Cochrane 981 Worcester Street Wellesley, MA 04282

Janet Cochrane 981 Worcester Street Wellesley, MA 04282





The Commonwealth of Massachusetts Secretary of the Commonwealth

State House, Boston, Massachusetts 02133

Secretary of the Commonwealth

June 1, 2009

TO WHOM IT MAY CONCERN:

I hereby certify that according to the records of this office,

RENAISSANCE INSURANCE AGENCY, INC.

is a domestic corporation organized on **August 15, 1994**, under the General Laws of the Commonwealth of Massachusetts.

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



CH CASSET

Processed By: crm

In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth
on the date first above written.

Secretary of the Commonwealth

William Travino Galicin