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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

****Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.****

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FOREIGN PROFIT/NONPROFIT CORPORATION

Pan-American Benefits Solutions, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

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2009 DEC 22 PM 1:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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J. Shivers DEC 23 2009

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Pan-American Benefits Solutions, Inc.

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," or "Certificate of Good Standing" 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:

John Foley
Name of Person
Panamerica Benefits Solutions, Inc.
Firm/Company
3701 W. Plano Parkway, Suite 250
Address
Plano, TX 75075
City/State and Zip code
duhcek@panamericanlife.com
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Ross Thompson at (512) 535-2342
Name of Person Area Code & Daytime Telephone Number

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 Cop ☐ \$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. Pan-American Benefits Solutions, 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. Texas

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

3. 61-1423744

(FEI number, if applicable)

4. 08/20/2002

(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. 3701 W. Plano Parkway, Suite 250, Plano, TX 75075

(Principal office address)

same

(Current mailing address)

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: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

, Florida 33324

(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.

C T Corporation System

By: _____

(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.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: John Foley

Address: 3701 W. Plano Parkway, Suite 250
Plano, TX 75075

Vice Chairman: _____

Address: _____

Director: Patrick Fraizer

Address: 3701 W. Plano Parkway, Suite 250
Plano, TX 75075

Director: Carlos Mickan

Address: 3701 W. Plano Parkway, Suite 250
Plano, TX 75075

B. OFFICERS

President: John Foley

Address: 3701 W. Plano Parkway, Suite 250
Plano, TX 75075

Vice President: David M. Cheek

Address: 3701 W. Plano Parkway, Suite 250
Plano, TX 75075

Secretary: Daniel LaGrone

Address: 3701 W. Plano Parkway, Suite 250, Plano, TX 75075

Treasurer: Jonathan Hogan

Address: 3701 W. Plano Parkway, Suite 250, Plano, TX 75075

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. John Foley, President

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

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TALLAHASSEE, FLORIDA

Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697



Hope Andrade
Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Incorporation for Pan-American Benefits Solutions, Inc. (file number 800113554), a Domestic For-Profit Corporation, was filed in this office on August 20, 2002.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on December 18, 2009.

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A handwritten signature in cursive script, appearing to read "Hope Andrade".

Hope Andrade
Secretary of State