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W10000031089



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DIVISION OF CORPORATIONS  
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7/16/10

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** LifeShield National Insurance Co.

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:

Heather Reeves

Name of Person

LifeShield National Insurance Co.

Firm/Company

629 NW Grand Blvd., Suite A,

Address

Oklahoma City, OK 73118

City/State and Zip code

heather.reeves@midfirst.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Heather Reeves

at (405) 767-7201

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 Copy    ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 2, 2010

HEATHER REEVES  
629 NW GRAND BLVD.  
SUITE A  
OKLAHOMA CITY, OK 73118

SUBJECT: LIFESHIELD NATIONAL INSURANCE CO.  
Ref. Number: W10000031689

We have received your document for LIFESHIELD NATIONAL INSURANCE CO. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any further questions concerning your document, please call (850) 245-6973.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 610A00016272

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F E P O J  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**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. LifeShield National Insurance Co.  
(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. Oklahoma 3. 73-1155182  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. April 28, 1982 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 629 NW Grand Blvd., Suite A, Oklahoma City, OK 73118  
(Principal office address)

PO Box 18223, Oklahoma City, OK 73154-0223  
(Current mailing address)

8. Insurance  
(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

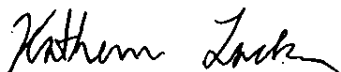
Office Address: 1200 South Pine Island Road

Plantation, Florida 33324  
(City) (Zip code)

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F.D.C.  
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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.*



(Registered agent's signature)

Katherine Lackey - Assistant Secretary

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:

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**A. DIRECTORS**

Chairman: George J. Records

Address: 501 NW Grand Blvd.

Oklahoma City, OK 73118

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

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

Director: Gary Peterson

Address: 629 NW Grand Blvd., Suite A

Oklahoma City, OK 73118

Director: Tim Tackett

Address: 501 NW Grand Blvd.

Oklahoma City, OK 73118

**B. OFFICERS**

President: Gary Peterson

Address: 629 NW Grand Blvd., Suite A

Oklahoma City, OK 73118

Vice President: David Brooks

Address: 501 NW Grand Blvd.

501 NW Grand Blvd.

Secretary: David Morgan

Address: 501 NW Grand Blvd., Oklahoma City, OK 73118

Treasurer: Tim Tackett

Address: 501 NW Grand Blvd., Oklahoma City, OK 73118

**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. Gary Peterson, President

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

OFFICE OF THE SECRETARY OF STATE



**CERTIFICATE OF GOOD STANDING**

**DOMESTIC FOR PROFIT CORPORATION INSURANCE**

*I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.*

*I FURTHER CERTIFY that LIFESHIELD NATIONAL INSURANCE CO. whose registered agent is DAVID MORGAN, with its registered office at 501 NW GRAND BLVD OKLAHOMA CITY 73118 6054 USA Oklahoma is a Domestic For Profit Corporation Insurance duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.*



*IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this 22nd, day of June, 2010.*

*M. Susan Savage*

Secretary Of State

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+ F.L.D.