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(City/State/Zip/Phone #)
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### **COVER LETTER**

TO: New Filing S Division of C				
SUBJECT:		J Ross Associates, Inc.		
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Dear Sir or Madam:				
"Certificate of Existe	cation by Foreign Corporation nce," or "Certificate of Good eign corporation to transact b	n for Authorization to Transad Standing" and check are sub usiness in Florida.	ct Business in Florida," mitted to register the	
Please return all corre	espondence concerning this m	natter to the following:		
	Breno	da Tortorice		
	Nam	ne of Person	,	
	L J Ross	Associates, Inc.		
		/Company		
	6360 lacks	on Road, Suite G		
<del></del>	· · · · · · · · · · · · · · · · · · ·	Address		
	Ann Ari	oor, MI 48103	5-1	
		ate and Zip code	2011 JAN 12 ALLAHASSE	
	·	@ljross.com		es.jes
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For firsthan information	on concerning this matter, ple	ago polls	(T)	F
roi luither illioillianc	in concerning this matter, pie	ase call.	3 3	<b>[</b> ]
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Brenda To		734 <u>) 995-5360</u> Trea Code & Daytime Telepho	one Number	
New Filing Some Division of Control	orporations ng ve Center Circle	MAILING AI New Filing Se Division of Co P.O. Box 6327 Tallahassee, Fi	ction prporations	
\$70.00 Filing Fed		■ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy	

## Collectors Insurance Agency, Inc. Power of Attorney

employed by Collectors Insurance Agency, Inc. as attorney-in-f	ndiger, Angela Butera, Lisa M. Eubanks and Janis St. Martin while fact for the entity to act for the entity and affiliates and subsidiaries ized herein by reference ("the Subsidiaries") in the Entities' and
fact the power to execute the documents necessary to file	eary steps to authorize the changes, hereby grants it's attorney-in- e qualifications, certificates of authority, registrations, business behalf of the Entity and Subsidiaries in any state, jurisdiction, the
This Power of Attorney expires when revoked by the	Entity or Affiliates or Subsidiaries.
IN WITNESS WHEREOF, the undersigned have executed this	Power of Attorney on the $\frac{9}{2}$ day of $\frac{10}{2}$ , 2010
	Signature of Authorized Entity Representative Beth Rowe, Vice President Print Name and Title
Sworn to and subscribed before me this $\underline{\underline{Q}}$ of $\underline{\underline{Dec}}$ , $\underline{\underline{201D}}$ .	BREMDA I TORRESTO
Notary Public, State of March Commission Expires: 10/22/2015	BRENDA L. TORTORICE Notary Public, State of Michigan County of Oakland My Commission Expires 10-22-2015 Acting In the County of Local County  Acti

## 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.

J Koss Associ	ates, Inc.				
		ED	," "COMPANY," "CORPORATION,"		
				,	
f name unavail	able in Florida, enter alternate corporate n	ame	adopted for the purpose of transacting business in Florid	la)	
fichigan		_ 3.	38-3092213		
ate or country	under the law of which it is incorporated)		(FEI number, if applicable)		
0/09/1992	17	5.	Perpetual		
(Date of incorporation)			(Duration: Year corp. will cease to exist or "perpetual")		
pon Qualificat	ion				
		//.1.	502, r.s., to determine penanty hability)		
60 Jackson Ros		944	reco)		
	•	auu	1000)		
Box 1838, A1		hha	reco)		
	(Saron manng	ичч			
ebt Collection			با کار	201	
	of corporation authorized in home state of	or co	ountry to be carried out in state of Florida)		and the same
ame and <u>stree</u>	t address of Florida registered agent:	(P.C	D. Box NOT acceptable)	AN 12	11
Name:	C T Corporation System		<u> </u>	<b>&gt;&gt;</b>	
e Address:	1200 South Pine Island Road		——————————————————————————————————————	=	Townson, State of the State of
	Plantation		, Florida 33324	Ę,	
	(City)		(Zip code)		
	f name unavailation of conc.," "Co.,"	f name unavailable in Florida, enter alternate corporate nated or country under the law of which it is incorporated)  0/09/1992  (Date of incorporation)  1/200 South Pine Island Road  Plantation  (Pornative or Country under the law of which it is incorporated)  (O/09/1992  (Date of incorporation)  (Date first transacted busine (SEE SECTIONS 607.1501 & 60 of 1501 & 60 of 1501 & 60 of 1501	Enter name of corporation; must include "INCORPORATED nc.," "Co.," "Corp.," "Inc," "Co," or "Corp.")  f name unavailable in Florida, enter alternate corporate name dichigan  [Inter or country under the law of which it is incorporated)  [Inter or country under law of which it is incorporated)  [Inter or country under law of which it is incorporated)  [Inter or country under law of which it is incorporated)  [Inter or country under law of which it is incorporated)  [Inter or country under law of which it is incorporated)  [Inter or country under law of which it is incorporated)  [Inter or country under law of which it is incorporated)  [Inter or country under law of which it is incorporated)  [Inter or country under law of which it is incorporated)  [Inter or country under law of which it is incorporated)  [Inter or country under law of which it is incorpora	Inter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," nc.," "Co.," "Corp." "Inc.," "Co.," or "Corp.")  In name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florid fichigan  [In the company of the law of which it is incorporated)  [In the company of the law of which it is incorporated)  [In the company of the law of which it is incorporated)  [In the company of the law of which it is incorporated)  [In the company of the purpose of transacting business in Florida (FeI number, if applicable)  [In the company of the purpose of transacting business in Florida (Duration: Year corp. will cease to exist or "perpetual (Duration: Year corp. will cease to exist or "perpe	Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," ne.," "Co.," "Corp." "Inc," "Co.," or "Corp.")  If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)  In finite and in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)  In finite and it is incorporated in florida, and it is incorporated in finite and it is incorporated in finite and it is incorporated in florida, if prior to registration in florida in florida, if prior to registration in florida in flo

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.

By: Jeanne Nelson

(Registered agent's signature)

C T Corporation System

Jeanne Nelson

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: A. DIRECTORS SEE ATTACHMENT Chairman: Address: Vice Chairman: Address: Director: \_\_\_\_\_ Address: \_\_\_ Address: **B. OFFICERS SEE ATTACHMENT** President: Alphonso Ross Address: 6360 Jackson Road, Suite G Ann Arbor, MI 48103 Vice President: Beth Rowe Address: 6360 Jackson Road, Suite G Ann Arbor, MI 48103 Secretary: Alphonso Ross Address: 6360 Jackson Road, Suite G, Ann Arbor, MI 48103 Treasurer: Alphonso Ross Address: 6360 Jackson Road, Suite G, Ann Arbor, MI 48103 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a

Robin Buendiger, Attorney-in-fact
(Typed or printed name and capacity of person signing application)

third degree felony as provided for in s.817.155, F.S.

#### Attachment to Florida Officers & Directors

Full Name: 1 Brenda Tortorice

Officer/Director: Officer Officer's Title: Owner

Director's Title:

Business Address: 6360 Jackson Road, Suite G

City: Ann Arbor

State: ΜI ZIP Code: 48103

2 Full Name: Linda Tortorice

Officer/Director: Officer

Officer's Title: Sr. Vice President/Owner

Director's Title: Director

Business Address: 6360 Jackson Road, Suite G

City: Ann Arbor

State: ΜI ZIP Code: 48103

3 Full Name: James Tortorice

Officer/Director: Officer Officer's Title: Owner

Director's Title:

Business Address: 6360 Jackson Road, Suite G

City: Ann Arbor

State: MI ZIP Code: 48103

Full Name: Alphoriso Ross Officer/Director: Officer, Director

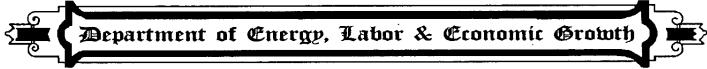
Officer's Title: President/CEO/Secy/Treas/Owner

Director's Title: Director

**Business Address:** 6360 Jackson Road, Suite G

City: Ann Arbor

ΜI State: ZIP Code: 48103



## Lansing, Michigan

This is to Certify That

L J ROSS ASSOCIATES, INC.

was validly incorporated on October 9, 1992, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 3rd day of January, 2011.

\_\_\_\_\_

Bureau of Commercial Services

**GOLD SEAL APPEARS ONLY ON ORIGINAL**