F11000001675

(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:		
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	Office Use Only	
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SEGRETARY OF STATE TALLAHASSEE, FLORIDA

T. Burch ARRIVA MA

COVER LETTER

Division of Corporations	
SUBJECT: The McLaughlin Company	
Name of corporation - mus	t include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Autho "Certificate of Existence," or "Certificate of Good Standing"a referenced foreign corporation to transact business in Florida.	and check are submitted to register the above
Please return all correspondence concerning this matter to the	following:
Traci Houston	
Name of Persor	1
Insurance Licensing Services	of America, Inc
Firm/Company	
111 N. Railroad	d
Address	
Groesbeck, TX 76	6642
City/State and Zip	
thouston@ilsainc.	com
E-mail address: (to be used for fut	ure annual report notification)
For further information concerning this matter, please call:	
Traci Houston at (254)	729-6157
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 Tallahassec, FL 32314
Enclosed is a check for the following amount:	
	8.75 Filing Fee & Sectificate Status & Certified Copy



RECEIVED

11 APR 18 PM 2: 12

SECRETARY OF STATE
TALLAHASSEE. FLORIDA

April 4, 2011

TRACI HOUSTON 111 N RAILROAD GROESBECK, TX 76642

SUBJECT: THE MCLAUGHLIN COMPANY

Ref. Number: W11000018903

We have received your document for THE MCLAUGHLIN COMPANY 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 name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

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.

Tim Burch Regulatory Specialist II

Letter Number: 311A00008076

DECETVED

APR 1 1 2011

BY: C 75609

www.sunbiz.org

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	E WITH SECTION 607.1503, FLORIDA REIGN CORPORATION TO TRANSAC			. [(/)	-
1. The McLaug	hlin Company		·		7
(Enter name of c	orporation; must include "INCORPORATI orp," "Inc," "Co," or "Corp.")	·		RY OF S	FILED
McCar (If name unavail	able in Florida, enter alternate corporate na	nSUVANCE me adopted for the pu	Services Appropriate transacting businesses	RAI RAI	<u> </u>
2	MD	3	530156390		
(State or country	under the law of which it is incorporated)	(1	530156390 FEI number, if applicable)		
	1/1935	5. Per	petual		
(Date	of incorporation)	(Duration: Year	corp. will cease to exist or	'perpetual")	
6		ualification			
	(Date first transacted busine (SEE SECTIONS 607.1501 & 60				
7	1725 DeSales Street NW, Suite		n, DC 20036		
	(Principal office	address)			
	1725 DeSales Street NW, Suit		on, DC 20036		
	(Current mailing	address)			
8.	Non-Resident Insur	ance Agency for l	Profit	•	
	s) of corporation authorized in home state o				
9. Name and street	et address of Florida registered agent: (P.O. Box NOT acc	eptable)		
Name:	Corporation Service Company				
Office Address:	1201 Hays Street				
	Tallahassee	, Florida 🥞	32301		
	(City)	,	(Zip code)		
Having been nam designated in this further agree to c	gent's acceptance: led as registered agent and to accept se application, I hereby accept the appoi omply with the provisions of all statute with and accept the obligations of my	ntment as registere es relative to the pro position as register	d agent and agree to act of the performant complete performed agent.	in this capacity. mance of my du	I
	William M. E	drington	William M. Edrington Authorized Represe	ntative	
	(Registered agent's signatu	are) <i>U</i>	· —————		

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:

	ECTORS		
Chairman:	: John T. Poppas		
Address:	1725 Desides St. N.W. Suite 700: Washinden, Pl 2003	16	
	· · · · · · · · · · · · · · · · · · ·		
Vice Chai	irman:	SA	2
Address:		CRE-	= =
		13.5 13.5 13.5 13.5 13.5 13.5 13.5 13.5	≠ ==
Director:	John T. Pappas	<u> </u>	<u>ح</u>
Address:	1725 DeSales Street NW, Suite 700; Washington, DC 20036	OF A	# FF
		<u> </u>	<u></u>
Director:			
Address:			
B. OFFI	ICERS		
President:	: Theodore Pappas		
	1725 DeSales Street NW, Suite 700; Washington, DC 20036		
Vice Presi	sident: Brenda Mantz & Cheri Brewer		
Address:	1725 DeSales Street NW, Suite 700; Washington, DC 20036		
Secretary:	Theodore Pappas		
Address:	1725 DeSales Street NW, Suite 700; Washington, DC 20036		
Treasurer:	·		
Address:			
	•		
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or directors	3.	
13	(Signature of Director or Officer listed in number 12 of the application)		
14	Theodore Pappas - President/Secretary		
,	(Typed or printed name and capacity of person signing application)		

STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT THE MCLAUGHLIN COMPANY, INCORPORATED OCTOBER 31, 1935, IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS MARCH 18, 2011.

Paul B. Anderson Charter Division

Paul B. Under

SECRETARY OF STATE TALLAHASSEE, FLORIDA



301 West Preston Street, Baltimore, Maryland 21201
Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941
MRS (Maryland Relay Service) (800) 735-2258 TT/Voice
Fax (410) 333-7097

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