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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

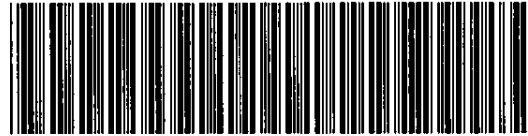
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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01/03/12--01028-014 \*\*78.75

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers JAN 04 2012

**KENNEDY LICENSING SERVICE, INC.**

**\*\*\* PROMPT ATTENTION REQUESTED \*\*\***

12/28/2011

Corp. Div.  
FL Secy. of State  
P.O. Box 6327  
Tallahassee, FL 32314

Re: **Chimienti & Associates**

Enclosed are the necessary applications to qualify the above referenced foreign corporation. Included are check(s) in the amount of \$78.75.

This corporation is anxious to obtain an insurance license in your state. Therefore, please process their application as soon as possible and forward the approved duplicate copy (if applicable) and Certificate of Authority to my attention (ppd. env. attached).

If you have any questions or require additional information, please contact me at 214-855-0737. Your cooperation and prompt attention to this request is greatly appreciated.

Sincerely,  
Kennedy Licensing Service, Inc.

***Deanna Stanley***

Deanna Stanley  
Vice President & Initial Lic'g Manager  
Email: [dstanley@kennedylicensing.com](mailto:dstanley@kennedylicensing.com)

cc: Chimienti & Associates  
VICTRIX (FL), Reg. Agt.

Enc: \$78.75 fee, App. in dup.,, Cert. G.S.

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STORE MAY 01 11AM  
TALLAHASSEE, FL 32314

## COVER LETTER

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

**SUBJECT:** Chimienti & Associates  
(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," 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:

Deanna Stanley

(Name of Person)

Kennedy Licensing Service, Inc.

(Firm/Company)

4144 N. Central Expy., Suite 800

(Address)

Dallas, TX 75204

(City/State and Zip code)

For further information concerning this matter, please call:

Deanna Stanley

(Name of Person)

at ( 214 ) 855-0737

(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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**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. Chimienti & Associates 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. California 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 5/18/98 5. perpetual  
(Date of incorporation) (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. 3400 W. Mineral King Ave., Suite B Visalia, CA 93291  
(Principal office address)

3400 W. Mineral King Ave., Suite B Visalia, CA 93291  
(Current mailing address)

8. Nonresident insurance agency sales and services  
(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)

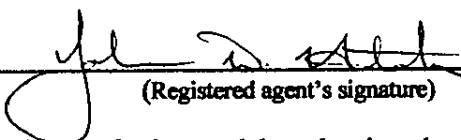
Name: John D. Hatch, Esquire

Office Address: 1267 Berkshire Lane, Suite 200

Tarpon Springs, Florida 34688  
(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)

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: \_\_\_\_\_

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

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

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

Director: \_\_\_\_\_

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

Director: \_\_\_\_\_

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

**B. OFFICERS**

President: SEE ATTACHED LIST

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

Vice President: \_\_\_\_\_

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

Secretary: \_\_\_\_\_

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

Treasurer: \_\_\_\_\_

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

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Toney Chimienti, president  
(Signature of Director or Officer listed in number 12 of the application)

14. Toney Chimienti, President  
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

**CHIMIENTI & ASSOCIATES  
STOCKHOLDERS / OFFICERS**

Catherine B. Chimienti  
50% Stockholder / Vice President  
500 N. Powell  
Visalia, CA 93291

Toney J. Chimienti  
50% Stockholder / President  
500 N. Powell  
Visalia, CA 93291

Sheryl L. Hunsinger  
Director  
4419 W. Damsen Lane  
Visalia, CA 93291

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TALLAHASSEE, FLORIDA

State of California  
Secretary of State

DEC 28 2011

CERTIFICATE OF STATUS

ENTITY NAME:

CHIMIENTI & ASSOCIATES

FILE NUMBER: C2108756  
FORMATION DATE: 05/18/1998  
TYPE: DOMESTIC CORPORATION  
JURISDICTION: CALIFORNIA  
STATUS: ACTIVE (GOOD STANDING)

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SECRETARY OF STATE

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of December 16, 2011.

*Debra Bowen*

DEBRA BOWEN  
Secretary of State