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# F1200000632

(R	equestor's Name)				
(A	ddress)				
(A	ddress)				
(City/State/Zip/Phone #)					
	☐ WAIT				
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	s of Status			
Special Instructions to Filing Officer:					
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Office Use Only



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ECRETARY OF STATE SION OF CORPORATIONS

PS 2/13/12/212-3500



January 19, 2012

ROBYN WELLS GEICO 5260 WESTERN AVENUE CHEVY CHASE, MD 20815

SUBJECT: GEICO CHOICE INSURANCE COMPANY

Ref. Number: W12000003500

We have received your document for GEICO CHOICE INSURANCE COMPANY 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.

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) 245-6901.

Letter Number: 912A00001359

Pamela Smith Regulatory Specialist II

www.sunbiz.org



Government Employees Insurance Company

GEICO General Insurance Company

■ GEICO Indemnity Company

GEICO Casualty Company

OFFICE OF THE GENERAL COUNSEL ONE GEICO PLAZA • WASHINGTON, DC 20076-0001

February 8, 2012

Ms. Pamela Smith
New Filing Section
Florida Department of State – Division of Corporations
2661 Executive Center Circle
Tallahassee, Florida 32301

RE: Ref. Numbers: W12000003493W12000003500, and W12000003502

Dear Ms. Smith:

Thank you for your letter dated January 19, 2012. As requested, I am re-submitting applications to register to transact business in Florida. Enclosed are a copy of your letter, the original application, and an original certificate from the State of Nebraska Secretary of State for GEICO Advantage Insurance Company, GEICO Choice Insurance Company, and GEICO Secure Insurance Company.

I can be reached at 301-986-2947 or via email are <u>RWells@GEICO.com</u>, if you have any questions or need additional information.

Sincerely,

Robyn Wells

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Counsel

#### **COVER LETTER**

TO:	New Filing Section Division of Corporations		
SUBJ	ECT: GEICO Choice Insurar	nce Company	
		ration - must include suffix	
Dear S	ir or Madam:		
"Certif	closed "Application by Foreign Corporation icate of Existence," or "Certificate of Good referenced foreign corporation to transact be	d Standing" and check are subm	
Please	return all correspondence concerning this r	matter to the following:	
Roby	yn Wells		
	Nar	ne of Person	_
GEI	CO		
	Firm	n/Company	
526	0 Western Avenue	•	
		Address	
Chev	vy Chase, MD 20815		
	City/S	state and Zip code	
rwells	s@geico.com		
	E-mail address: (to be	used for future annual report no	tification)
For fur	ther information concerning this matter, ple	ease call:	
Roby	yn Wells at (_30	01 <sub>)</sub> 986 - 2947	
		Area Code & Daytime Telephor	ne Number
·	•		
	STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING AD New Filing Sect Division of Cor P.O. Box 6327 Tallahassee, FL	tion porations
Enclose	ed is a check for the following amount:		
<b>□</b> \$7	70.00 Filing Fee \$\text{Certificate of Status}	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy



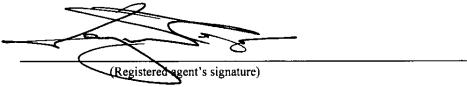
## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.

(Enter name of c	ce Insurance Company corporation; must include "INCORPORATI corp," "Inc," "Co," or "Corp.")	ED,	"COMPANY," "CORPORATION,"	1-11-	-
(If name unavail	able in Florida, enter alternate corporate na	ame	adopted for the purpose of transacting business i	n Florida)	-
<sub>2.</sub> Nebraska		3.	45-2524467		_
(State or country	under the law of which it is incorporated)	-	(FEI number, if applicable)		-
4. 6/13/2011		5.	5. Perpetual		
	of incorporation)		(Duration: Year corp. will cease to exist or "pe	erpetual")	-
6. <b>n/a</b>					_
			Florida, if prior to registration) 02, F.S., to determine penalty liability)		
- 5260 Most	ern Avenue, Chevy Chase N		• •		
7. 3200 44650	(Principal office			<del></del>	-
5260 West	tern Avenue, Chevy Chase		•		
0200 1103	(Current mailing				-
	Ţ				
8. Property a	nd Casualty Insurance Cor	mp	any	12	IVID S
(Purpose(s	s) of corporation authorized in home state of	or co	untry to be carried out in state of Florida)	EEB	SECR
9. Name and stree	et address of Florida registered agent: (	(P.C	Box NOT acceptable)	0   8	ETAR UF (
Name:	George W. Rogers			PH	Y OF CORPC
Office Address:	3535 W. Pipkin Road			PH 12: 54	STATI
	Lakeland		, Florida 33807	Ę	SES.
	(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.



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					
Chairman: Olza M. Nicely					
Address: 5260 Western Avenue					
Chevy Chase MD, 20815	<del></del>				
Vice Chairman: n/a					
Address: n/a					
<u>n/a</u>					
Director: Michael H. Campbell		<u>-</u> .			
Address: 5260 Western Avenue					
Chevy Chase MD, 20815					
Director: Seth M. Ingall					
Address: 5260 Western Avenue					
Chevy Chase MD, 20815					
B. OFFICERS					
President: Olza M. Nicely					
Address: 5260 Western Avenue					
Chevy Chase MD, 20815					
Vice President: William E. Roberts					
Address: 5260 Western Avenue	12	DIV			
Chevy Chase MD, 20815	83.	ECIN			
Secretary: William C. E. Robinson	10	GAR.			
Address: 5260 Western Avenue, Chevy Chase MD 20815	PH	043. 04. 07. 07.			
Treasurer: Charles G. Schara	2:5	NATE OF			
Address: 5260 Western Avenue, Chevy Chase MD 20815		3			
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.					
13. X plling Calinson					
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 berein					

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

#### 14. William C. E. Robinson

#### ..STATE OF



#### **NEBRASKA**

United States of America, State of Nebraska

ss.

Department of State Lincoln, Nebraska

I, John A. Gale, Secretary of State of Nebraska do hereby certify;

### GEICO CHOICE INSURANCE COMPANY

with its registered office located in LINCOLN, Nebraska, filed Articles of Incorporation in this office on June 13, 2011.

I further certify that said corporation is in existence as of this date.

In Testimony Whereof,

affixed the Great Seal of the State of Nebraska on January 30, 2012.

SECŘETARÝ OFSTATE



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.

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