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COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: McLaughlin Ryder Investments Inc. 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:		
Michelle Glicklin. Name of Person		
McLaughlin Ryder Investments, Inc. Firm/Company		
1421 Prince Street.		
Alexandria, VA 22314.		
Alexandria, VA 22314. City/State and Zip code Malicklin & mclaughlin (ydex · co M · E-mail address: (to be used for future annual report notification) E-mail address:		
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:		
Michelle Glicklin at (703)684-9222 Name of Person Area Code & Daytime Telephone Number 5		
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, 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.

1. McLaughlin Kuder Investments, 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. Minnesota. (State or country under the law of which it is incorporated) 3. 26-0427041. (FEI number, if applicable)
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 7/2/07 5. percetual.
4. 7207 5. perpetual. (Duration: Year corp. will cease to exist or "perpetual")
6.
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 1421 Prince Street Alexandria, VA 22314. (Principal office address)
_ ·
1421 Prince Street Alexandria, VA 22314. (Current mailing address)
(Current mailing address)
8. <u>Sale of variable annuities</u>
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
(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: Janet O'Neil
Office Address: 6504 Turtle Creek Blvd. Tampa., Florida 33625.
Tampa., Florida 33625.
Tampa., Florida 33625. (City) (Zip code)
10 Degistared agent's perentance

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.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Address: Alexandria, VA 22314. Vice Chairman: Address: Director: ___ Address: Address: _ **B. OFFICERS** President: Shawn P McLaughlin. Address: 1421 Prince Street Alexandria, VA 20314 Vice President: Address: ______ Secretary: _ Address: Treasurer: Address: __ NOTE: If necessary, you may attach an addendyn 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 third degree felony as provided for in s.817.155, F.S.

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

Office of the Minnesota Secretary of State Certificate of Good Standing

I, Mark Ritchie, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name: McLaughlin Ryder Investments, Inc.

Date filed: 07/02/2007

File Number: 2418162-2

Minnesota Statutes, Chapter: 302A

Home Jurisdiction: Minnesota

This certificate reflects data thru: 12/01/2011

This certificate has been issued on: 02/14/2012

SECRETARY OF STATE ALLAHASSEE FLOORS



Mark Ritchie
Mark Ritchie

Secretary of State State of Minnesota