

F1200 0001322

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

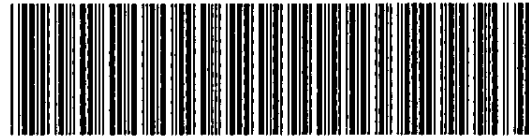
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers MAR 20 2012



Corporate Services

March 23, 2012

BY FEDERAL EXPRESS

Department of State
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**Re: Inter-Pacific Insurance Brokers, Inc. – Application for Authorization to Transact
Business**

Dear Sir/Madam:

Please find attached an Application for Authorization to Transact Business for the Referenced Corporation for filing. Please also find attached a Certificate of Good Standing and a check in the amount of \$70 in payment of your filing fee.

Please forward all correspondence in connection with this filing to: 3H Corporate Services, LLC 6 Clement Avenue Saratoga Springs, NY 12866 Attn. Gary T. Harker, Esq. We look forward to receiving the Authority in due course. In the meantime, please do not hesitate to contact me at 518 583-0639 Ext. 111 if you have any questions.

Best regards,

Yours truly,

Gary T. Harker

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Inter-Pacific Insurance Brokers, 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:

Gary T. Harker

Name of Person

3H Corporate Services, LLC

Firm/Company

6 Clement Avenue

Address

Saratoga Springs, NY 12866

City/State and Zip code

gary.harker@3has.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gary Harker

Name of Person

at (518) 583-0639 Ext. 111

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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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. INTER-PACIFIC INSURANCE BROKERS, 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

(State or country under the law of which it is incorporated)

3. 94-2734339

(FEI number, if applicable)

4. MAY 20, 1981

(Date of incorporation)

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. 1600 DRAPER STREET, KINGSBURG, CA 93631

(Principal office address)

P. O. BOX 336, KINGSBURG, CA 93631

(Current mailing address)

8. _____

(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: 3H AGENT SERVICES, INC.

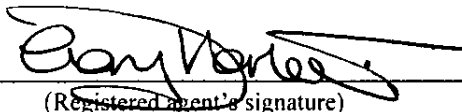
Office Address: 1970 OSTER WAY

PALM HARBOR, Florida 34685
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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)

PRESIDENT OF 3H AGENT SERVICES, INC.

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: CHRISTIAN W. VAN BEURDEN

Address: 1600 DRAPER STREET
KINGSBURG, CA 93631

Vice Chairman: _____

Address: _____

Director: ERIK J. VAN BEURDEN

Address: 1600 DRAPER STREET
KINGSBURG, CA 93631

Director: _____

Address: _____

B. OFFICERS

President: CHRISTIAN W. VAN BEURDEN

Address: 1600 DRAPER STREET
KINGSBURG, CA 93631

Vice President: _____

Address: _____

Secretary: ERIK J. VAN BEURDEN

Address: 1600 DRAPER STREET, KINGSBURG, CA 93631

Treasurer: ERIK J. VAN BEURDEN

Address: 1600 DRAPER STREET, KINGSBURG, CA 93631

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

13. _____

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.

14. CHRISTIAN W. VAN BEURDEN, PRESIDENT

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

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2012 MAR 27 AM 11:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

State of California
Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

INTER-PACIFIC INSURANCE BROKERS, INC.

FILE NUMBER: C1077072
FORMATION DATE: 05/20/1981
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 March 19, 2012.

Debra Bowen

DEBRA BOWEN
Secretary of State