

F12000003283

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

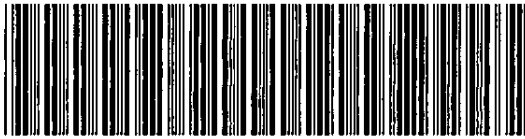
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

112-39700

Office Use Only



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07/26/12--01016--006 **70.00

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114



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 27, 2012

3H AGENT SERVICES, INC.
1970 OTTER WAY
PALM HARBOR, FL 34685

SUBJECT: ASCENSION INSURANCE AGENCY, INC.
Ref. Number: W12000039700

We have received your document for ASCENSION INSURANCE AGENCY, INC. and your check(s) totaling \$70.00. 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 the corrected original and one copy of 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) 245-6052.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 812A00019788

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. Ascension Insurance Agency, Inc.
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
2. Delaware 3. 26-3652075
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 10/31/2008 5. Perpetual
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. N/A
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 5821 Fairview Rd., Ste. 500
(Principal office address)

Charlotte, North Carolina
(Current mailing address)

8. Sale(s) of Insurance Products and Services
(Purpose(s) of corporation authorized in home state or country to be carried out in the 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 Otter Way

Palm Harbor, Florida 34685
(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.

 VP of 3H Agent Services, Inc.
(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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TALLAHASSEE, FLORIDA

12. Names and addresses of officers and/or directors:

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A. DIRECTORS

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Chairman: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Address: _____

Vice Chairman: _____

Address: _____

Director: Leonard P. Kline, Jr.

Address: 2345 Grand Blvd., Ste. 610 Kansas City, Missouri 64108

Director: _____

Address: _____

B. OFFICERS

President: Clarkson B. McLean

Address: 5821 Fairview Rd., Ste. 500 Charlotte, North Carolina 28209

Vice President: _____

Address: _____

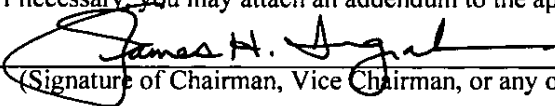
Secretary: James H. Ingraham

Address: 2345 Grand Blvd., Ste. 610 Kansas City, Missouri 64108

Treasurer: Robert S. Schneider

Address: 2345 Grand Blvd., Ste. 610 Kansas City, Missouri 64108

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

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. James H. Ingraham, Executive Vice President & Secretary
(Typed or printed name and capacity of person signing application)

**Director
And
Officers of
ASCENSION INSURANCE AGENCY, INC.**

(Delaware, 26-3652075, 10/31/2008)
(a subsidiary of Ascension Insurance, Inc.)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

| Name | Title | Address |
|-----------------------|---|--|
| Leonard P. Kline, Jr. | Director / Chief Executive Officer | 2345 Grand Blvd., Ste. 610 Kansas City, Missouri 64108 |
| Clarkson B. McLean | President | 5821 Fairview Rd., Ste. 500 Charlotte, North Carolina 28209 |
| Robert S. Schneider | Executive Vice President, and Treasurer | 2345 Grand Blvd., Ste. 610 Kansas City, Missouri 64108 |
| James H. Ingraham | Executive Vice President and Secretary | 2345 Grand Blvd., Ste. 610 Kansas City, Missouri 64108 |
| Jill R. Black | Chief financial Officer | 5821 Fairview Rd., Ste. 500 Charlotte, North Carolina 28209 |

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ASCENSION INSURANCE AGENCY, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIRST DAY OF AUGUST, A.D. 2012.


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SECRETARY OF STATE
DELAWARE

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120892662

You may verify this certificate online
at corp.delaware.gov/authver.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 9751444

DATE: 08-01-12