F12000004974

| . (Re | questor's Name) | | | |
|---|-----------------|-------------|--|--|
| (Address) | | | | |
| (Ad | dress) | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (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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SECRETARY OF STATE

COVER LETTER

| TO: New Filing Division of | Section Corporations | | | |
|--|---|---|---|--|
| SUBJECT: | DEnny and Name of corpora | Associates | INC. | |
| Dear Sir or Madam | : | | | |
| "Certificate of Exis | lication by Foreign Corporation tence," or "Certificate of Good oreign corporation to transact bu | Standing" and check are sub | | |
| _ | rrespondence concerning this ma | • | | |
| المر الم | Ennis T DE | nny | | |
| | Name | of Person | | |
| Denny and Associates INC. Firm/Company | | | | |
| | Firm/C | Company | | |
| | 100 Bent Oak | <u>.</u> C+ | | |
| | Α. | ddress | | |
| | Lake St Louis | 5 Mo 633 | 67 | |
| | Lake St Louis City/Sta dennts + dennts | te and Zip code LUSUVANCE. ed for future annual report i | Commotification) | |
| For further informa | tion concerning this matter, plea | | | |
| Denni - Name of P | erson at (31 | y <u>474-80</u> rea Code & Daytime Teleph | one Number | |
| New Filing Division of Clifton Bui 2661 Exect | Corporations | MAILING A New Filing Se Division of Co P.O. Box 6327 Tallahassee, F | ection orporations 7 | |
| Enclosed is a check | for the following amount: | | | |
| □ \$70.00 Filing Fe | ee | □ \$78.75 Filing Fee & Certified Copy | S87.50 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. DENNY AND ASSOCIATES INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") Tenny and Associates Inc. Florida. (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (State or country under the law of which it is incorporated)

3. 43-17 04 737

(FEI number, if applicable) Feb 14 1995

(Date of incorporation)

5. Perpetual (Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 100 Bent Jak Ct. Lake St. 2011 Mo 63367
(Principal office address) (Current mailing address) Insurance Sales (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: 30 Medalist Ct.

Rotonda West, Florida 3344

(City) (Zip code) Office Address: 10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the placedesignated 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 | |
| Chairman: DEMNIS T. DENNY | |
| Chairman: DEMNIS T. DEMNY Address: 30 Medalin Ct. | |
| Rotonda West, Fl. | |
| Vice Chairman: | |
| Address: | |
| | |
| Director: Kelly L. Restor Address: 420 Rascal Crossing O Fallon, Mo 63366 | |
| Address: 420 Rascal Crossing | |
| O Fallon, Mo 63366 | |
| Director: | |
| Address: | |
| | |
| B. OFFICERS | TAS 1 |
| President: DEnnis T DENNY | 2 DE |
| President: Dennis T Denny Address: 30 Medal of C+ | TASS |
| Rotonda West. Fl. 33947 | ms a m |
| Vice President: Kelly L. Rector | 三 |
| Address: 420 Rascal Crossing | |
| O Fellon, Mo 63366 | |
| Secretary: DEMAS TDEMAS - Treasure | |
| \sim | F1. 33947 |
| Treasurer: Kelly L. Restan - Secretary | |
| Address: 420 Rascal Crossing OFallon Mo | 63366 |
| NOTE: If necessary, you may attach an addendum to the application listing additional offi | cers and/or directors. |
| 13. Dennie Dong · President /c | i |
| Signature of Director or Officer | |
| The officer or director signing this document (and who is listed in number 12 above) affirm are true and that he or she is aware that false information submitted in a document to the Documen | |
| a third degree felony as provided for in s.817.155, F.S. 14. \mathcal{D}_{Enn} | |
| 14. <u>WEnnis</u> (Typed or printed name and capacity of person signing application) |) |

STATE OF MISSOURI



Robin Carnahan Secretary of State

CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that $\sum_{i=1}^{\infty} S_i$

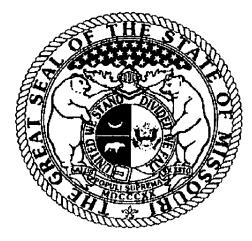
DENNY AND ASSOCIATES INC. 00407289

was created under the laws of this State on the 14th day of February, 1995, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 3rd day of December, 2012

in Camalan

Secretary of State



Certification Number: 15060120-1 Reference:

Verify this certificate online at https://www.sos.mo.gov/businessentity/soskb/verify.asp