

F13000003544

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

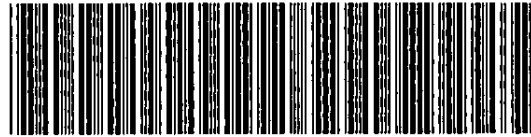
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600249483786

07/08/13--01012--019 \*\*87.50

Bank approval

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13 AUG 12 AM 9:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** BancInsure, Inc. dba BancInsure Insurance Company

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:

Kathy C. Carrington

Name of Person

BancInsure, Inc.

Firm/Company

P.O. Box 26104

Address

Oklahoma City, OK 73118

City/State and Zip code

kathy.carrington@bancinsure.com ✓

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

For further information concerning this matter, please call:

Kathy Carrington

Name of Person

at ( 405 ) 416-5156

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:

- |   |  |   |  |
|---|--|---|--|
| <input type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certified Copy | <input checked="" type="checkbox"/> \$87.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy |
|---|--|---|--|

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TALLAHASSEE, FLORIDA



August 5, 2013

Ms. Diane Cushing  
Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Re: BancInsure, Inc.  
Ref. No. W13000039305

Dear Ms. Cushing,

I am enclosing approval from the Florida Office of Financial Regulation for our use of the name BancInsure, Inc. in connection with our Application by Foreign Corporation for Authorization to Transact Business in Florida.

The request from the Division of Corporations to apply for this name approval stated that our original application documents were enclosed; however, the original application documents were not included with the letter. I called the Division of Corporations on July 23<sup>rd</sup> and was assured that the office would hold our original application and, upon approval of the corporate name from the Office of Financial Regulation, would continue to process our application.

Please let us know if there is any additional information or documentation that you will need with regard to our Application for Authorization to Transact Business in Florida.

Sincerely,

Kathy C. Carrington  
Executive Assistant/Paralegal  
(405) 416-5156  
[kathy.carrington@bancinsure.com](mailto:kathy.carrington@bancinsure.com)

Enclosures: Corporate name approval from Florida Office of Financial Regulation dated July 30, 2013  
Letter # 513A00017012 from Florida Division of Corporations dated July 12, 2013



STREET ADDRESS: 101 East Gaines Street, Suite 636 • PHONE (850) 410-9800 • FAX (850) 410-9548  
MAILING ADDRESS: Division of Financial Institutions, 200 East Gaines Street, Tallahassee, FL 32399-0371  
Visit us on the web: [WWW.ITSYOURMONEYFLORIDA.COM](http://WWW.ITSYOURMONEYFLORIDA.COM) • 850-487-9687

**DREW J. BREAKSPEAR**  
COMMISSIONER

July 30, 2013

Ms. Kathy C. Carrington  
5104 N. Francis  
Suite 101  
Oklahoma City, OK 73118

Re: BancInsure, Inc.

Dear Ms. Carrington:

Thank you for your recent correspondence requesting approval for use of the above-referenced name.

It is the opinion of this Office that the above-referenced corporate name is definitive enough to differentiate the business being conducted from that of a commercial bank or trust company. Therefore, the Office does not object to your use of the above-referenced name being registered to conduct business in the state of Florida. However, this does not give one the authority to act in any licensed capacity until all licensing requirements have been met within this state.

Sincerely,

Robert D. Hayes  
Director

RDH:bk

cc: Brenda Tadlock, Chief, Bureau of Commercial Recordings, Division of Corporations,  
Department of State



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

JUL 23 2013

LEGAL DEPT.

July 12, 2013 — *deadline Sept. 12.*

KATHY C. CARRINGTON  
BANCINSURE, INC.  
P.O. BOX 26104  
OKLAHOMA CITY, OK 73118

SUBJECT: BANCINSURE, INC.  
Ref. Number: W13000039305

13 AUG 12 PM 3:28

We have received your document for BANCINSURE, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Written approval and clearance of the words BANK, BANC, BANCO, BANQUE, BANKER, BANKING, TRUST COMPANY, SAVINGS AND LOAN ASSOCIATION, SAVINGS BANK or CREDIT UNION, or words of similar import in any context or any manner must be obtained from the Office of Financial Regulation, pursuant to section 655.922(2a), Florida Statutes.

Enclosed is a "Corporate Name Approval Request" form to be completed and sent to the address indicated on the form. If the proposed name is approved by the Office of Financial Institutions, resubmit the document and the approval letter to the Division of Corporations for filing. The Office of Financial Institutions' phone number is 850-410-9800.

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) 245-6052.

Diane Cushing  
Regulatory Specialist II Supervisor

Letter Number: 513A00017012

*FL has original  
ref # in future  
communication*

**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. **BancInsure, Inc.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

**BancInsure Insurance Company**

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. **Oklahoma**

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

3. **73-1238130**

(FEI number, if applicable)

4. **March 7, 1985**

(Date of incorporation)

5. **Perpetual**

(Duration: Year corp. will cease to exist or "perpetual")

6. **N/A**

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. **5104 N. Francis Avenue, Suite 101, Oklahoma City, OK 73118**

(Principal office address)

**P.O. Box 26104, Oklahoma City, OK 73126**

(Current mailing address)

8. **Insurance Company**

(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: **CSC**

Office Address: **1201 Hays Street**

**Tallahassee**

(City)

, Florida **32301**

(Zip code)

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STATE OF FLORIDA  
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)

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.

## ACCEPTANCE OF APPOINTMENT

**RE: BancInsure, Inc. dba BancInsure Insurance Company**

Pursuant to Section 48.091 and 607.0501, Florida Statutes, the undersigned acknowledges and accepts its appointment as registered agent of the above corporation and agrees to act in the capacity and to comply with the provisions of the Florida Business Corporation Act (1990) relative to keeping open the registered office at the address specified above. The undersigned is familiar with, and accepts the obligations of Section 607.0505, Florida Statutes.

Dated: *June 21, 2013*

CSC CORPORATION SERVICE COMPANY

*Paula S. Callery*  
*Asst. Secretary*

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TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

Chairman: Scott W. Hartman

Address: 260 Madison Avenue, 8th Floor  
New York, NY 10016

Vice Chairman: Andrew M. Scherr

Address: 260 Madison Avenue, 8th Floor  
New York, NY 10016

Director: Lisa G. Bays

Address: 5104 N. Francis Avenue, Suite 101  
Oklahoma City, OK 73118

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Lisa G. Bays

Address: 5104 N. Francis, Suite 101  
Oklahoma City, OK 73118

Vice President: Lynette Parmley

Address: 5104 N. Francis Avenue, Suite 101  
Oklahoma City, OK 73118

Secretary: Jim Cross

Address: 5104 N. Francis Avenue, Suite 101, OKC, OK 73118

Treasurer: Mark Krienke

Address: 5104 N. Francis Avenue, Suite 101, OKC, OK 73118

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. Lisa G. Bays, President/CEO/General Counsel

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

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DEPT. OF STATE  
TALLAHASSEE, FLORIDA



OFFICE OF THE SECRETARY OF STATE



**CERTIFICATE OF GOOD STANDING  
DOMESTIC FOR PROFIT CORPORATION INSURANCE**

*I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.*

*I FURTHER CERTIFY that BANCINSURE, INC., whose registered agent is LISA G BAYS, with its registered office at 5104 N FRANCIS AVE STE 101 OKLAHOMA CITY 73118 USA Oklahoma is a Domestic For Profit Corporation Insurance duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. 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. Such information is not available from this office.*



IN TESTIMONY WHEREOF, I hereunto  
set my hand and affixed the Great Seal of the  
State of Oklahoma, done at the City of  
Oklahoma City, this 27th, day of June,  
2013.

*Harry V. Parnell*

Secretary Of State

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STATE  
FALL ASSET  
JORDA