F13000004125

(Requestor's Name)		
(Address)	700250979687	
(Address)		
(City/State/Zip/Phone #)		
(Business Entity Name)	09/04/1381013802 **70.00	
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:	FILED 13 SEP 23 PM 4: 35 SECRETARY OF STATE TALLAHASSEE, FLORIDA 13 15 16 17 17 17 17 17 17 17 17 17	

V413-49682

Office Use Only

COVER LETTER

TO: New Filing Section Division of Corporations		
A = 4 + 2 = 1		
SUBJECT: Actuarial Group, Inc. Name of corporation - must include suffix		
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation	on for Authorization to Transact Business in Florida," d Standing" and check are submitted to register the business in Florida.	
Please return all correspondence concerning this	matter to the following:	
John Humphries		
Nan	ne of Person	
Actuarial Group, Inc.		
	n/Company	
1015 Tyrone Road, Suite 120)	
Tyrone/GA 30290	Address	
City/S	tate and Zip code	
humphries@agiservices.net		
E-mail address: (to be	used for future annual report notification)	
For further information concerning this matter, pl	ease call:	
Adam Lewis at 77	′0 、774-1101 ext. 219	
Name of Person	774-1101 ext. 219 Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount:	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
■ \$70.00 Filing Fee	□ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certified Copy □ Certified Copy	



September 9, 2013

JOHN HUMPHRIES AGI SERVICES 1015 TYRONE ROAD, SUITE 120 TYRONE, GA 30269

SUBJECT: ACTUARIAL GROUP INC. D/B/A/ AGI SERVICES

Ref. Number: W13000049682

We have received your document for ACTUARIAL GROUP INC. D/B/A/ AGI SERVICES and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$1,400.00.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Ruby Dunlap Regulatory Specialist II

Letter Number: 313A00021170



Actuarial Group, Inc. 1015 Tyrone Road, Suite 120 Tyrone, GA 30290

> Tel: 770-774-1101 Fax: 770-774-1103

Florida Department of State New Filing Section Division of corporations P.O. Box 6327 Tallahassee, FL 32314

To whom it may concern:

The enclosed documents are Actuarial Group, Inc.'s d/b/a AGI Services' resubmission of registration forms for obtaining foreign profit corporation status in the state of Florida. Per the request sent to us by the New Filing Section, the following changes have been made to the registration forms:

- 1. The name of our corporation has been changed from "Actuarial Group, Inc. d/b/a AGI Services" to "Actuarial Group, Inc." We understand that we must file the d/b/a or "fictitious name" in a separate submission.
- 2. The date of business first transacted in Florida has been corrected to n/a because Actuarial Group, Inc. has not had employees or operations in Florida.

Neither our certificate of existence from our state of incorporation nor our check for the \$70.00 filing fee have been included in this package, as both were sent with our previous submission and are already in the possession of the New Filing Section.

We have also submitted a request for a Certificate of Existence from the State of Florida. This request is being held indefinitely until we are officially registered as a foreign profit corporation.

Please let us know if any further information is needed to process our request. We appreciate your speedy return of our first submission, and we look forward to working with the State of Florida on future endeavors.

Sincerely,

John Humphries Managing Partner 13 SEP 23 AM 9: 49
SECRETARY OF STATE
TALLAHASSEF FISHER

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.

· ·	Group, Inc. proporation; must include "INCORPORATE!	D," "COMPANY," "CORPORATION,"	
	orp," "Inc," "Co," or "Corp.")		
AGI Serv	ices, Inc.		
(If name unavails		ne adopted for the purpose of transacting business in Florid	da)
_{2.} Georgia		_{3.} 58-2286746	
	under the law of which it is incorporated)	(FEI number, if applicable)	 -
_{4.} 2/11/199	7	_{5.} Perpetual	
· · · · · · · · · · · · · · · · · · ·	of incorporation)	(Duration: Year corp. will cease to exist or "perpetua	l")
6. N/A			
		s in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	
₇ 1015 Tyro	ne Road, Suite 120, Tyro	one GA 30290	
· ·	(Principal office a		
Same as A	Above		
	(Current mailing a	ddress)	
Einonoial	and Pagulaton, Sanjage		
·	and Regulatory Services	country to be carried out in state of Florida)	
•	•		
Name and stree	t address of Florida registered agent: (I	P.O. Box NOT acceptable)	\$
Name:	NRAI Services, Inc.		2 71
Office Address:	1200 South Pine Island F	Road	FILED SP 23 PM
	Plantation	, Florida 33324	3 FEL
	(City)	(Zip code)	PH 4: 35
10 Dogistand as	randia a cantonaci		ب ر دن
10. Registered ag Having been name		rvice of process for the above stated corporation at	7 3 4
designated in this	application, I hereby accept the appoin	ntment as registered agent and agree to act in this o	capacity. I
further agree to co duties, and I am fi	omply with the provisions of all statute omiliar with and accept the obligations	s relative to the proper and complete performance is sof my position as registered agent.	oj my
	NPAI Sel	rvius, Inc	
B	L' Leal no Boo	Leziee Brown, Assistant Secretary	
12	(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:

airman: AGI Services does not have a board	FILED
n/a	13 SEP 23 PM 4: 35
ess:	SECRETARY OF STATE TALLAHASSEE, FI-ORIDA
Chairman: n/a	
ess:	
n/a	
ess:	
tor: n/a	
ess:	
OFFICERS	
John Humphries	
1015 Tyrone Road, Suite 120	
Tyrone, GA 30290	
President: John Humphries	
ess:	
John Humphries	
ess:	
urer: John Humphries	
ess:	
TE: If necessary, you may attach an addendum to the application listing	additional officers and/or directors.
Signature of Director or Officer of the director of Signature of Director or Officer of the director signing this document (and who is listed in number 12 rue and that he or she is aware that false information submitted in a document (and who is listed in a document that he or she is aware that false information submitted in a document that he or she is aware that false information submitted in a document (and who is listed in number 12 rue and that he or she is aware that false information submitted in a document (and who is listed in number 12 rue and that he or she is aware that false information submitted in a document (and who is listed in number 12 rue and that he or she is aware that false information submitted in a document (and who is listed in number 12 rue and that he or she is aware that false information submitted in a document (and who is listed in a document (and who is listed in number 12 rue and that he or she is aware that false information submitted in a document (and who is listed in number 12 rue and that he or she is aware that false information submitted in a document (and who is listed in number 12 rue and that he or she is aware that false information submitted in a document (and who is listed in number 12 rue and lis	
hird degree felony as provided for in s.817.155, F.S. John Humphries, Managing Partner, President, Se	•

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

STATE OF GEORGIA

Secretary of State Corporations Division 313 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CONTROL NUMBER DATE INC/AUTH/FILED: February 11, 1997 JURISDICTION

PRINT DATE

: K707166

: Georgia

: 8/30/2013 9:26:00 AM

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under my office that

> ACTUARIAL GROUP, INC. A Domestic Corporation

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Brian P. Kemp Secretary of State

Tracking #: mVLCDVCu