

F/3000 05501

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

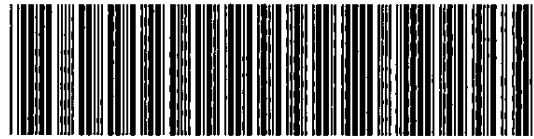
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY'S
DIVISION OF THE
CLERK OF THE
13 DEC 23 AM 11:00

[Handwritten signature]
12/26/13

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Brown & Brown of Central Oklahoma, 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:

Idarmi Casanas
Name of Person

Brown + Brown Inc.
Firm/Company

655 N. Franklin Str. - Suite 1900
Address

Tampa, FL 33602
City/State and Zip code

icasanas@bbinslegal.com

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

For further information concerning this matter, please call:

Idarmi Casanas
Name of Person

at (813) 222-4237
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

SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 DEC 23 AM 11:00

**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. Brown & Brown of Central Oklahoma, 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. Oklahoma 3. 73-1351024
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10/06/1989 5. Perpetual
(Date of incorporation) (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. 3409 S. BROADWAY, Suite 800, Edmond, OK 73013
(Principal office address)

same
(Current mailing address)

8. To engage in all lines of insurance-related business as an insurance agent/broker.
(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: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(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.

CT Corporation System
By: [Signature]
(Registered agent's signature)

**Angel Nunez
Assistant Secretary**

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 *SEE ATTACHMENT*

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS *SEE ATTACHMENT*

President: C. Roy Bridges

Address: 655 N. Franklin Street, Suite 1900

Tampa, FL 33602

Vice President: Carolyn Burton

Address: 120 S Broadway

Tecumseh, OK 74873

Secretary: Laurel L. Grammig

Address: 655 N. Franklin St., Suite 1900, Tampa, FL 33602

Treasurer: Michele Sanders

Address: 2800 N Central Avenue Suite 1600, Phoenix, AZ 85004

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. Laurel L. Grammig, Secretary

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

**Attachment to Florida
Officers & Directors**

- 1 Full Name: Cory T. Walker
Officer/Director: Officer
Officer's Title: Vice President
Director's Title:
Business Address: 220 S. Ridgewood Avenue
City: Daytona Beach
State: FL
ZIP Code: 32114
- 2 Full Name: Tommy K. Huval
Officer/Director: Officer
Officer's Title: Executive Vice President
Director's Title:
Business Address: 102 Asma Boulevard, Suite 300
City: Lafayette
State: LA
ZIP Code: 70508
- 3 Full Name: William Evans
Officer/Director: Officer
Officer's Title: Executive Vice President
Director's Title:
Business Address: 10700 North Freeway (I-45) Suite 300
City: Houston
State: TX
ZIP Code: 77037
- 4 Full Name: C. Roy Bridges
Officer/Director: Director
Officer's Title:
Director's Title: Director
Business Address: 655 N. Franklin Street, Suite 1900
City: Tampa
State: FL
ZIP Code: 33602

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 BROWN & BROWN OF CENTRAL OKLAHOMA, INC. whose registered agent is THE CORPORATION COMPANY, with its registered office at 1833 SOUTH MORGAN RD OKLAHOMA CITY 73128 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 5th, day of December, 2013.

A handwritten signature in cursive script, reading "Chris Beuge", is written over a horizontal line.

Secretary Of State