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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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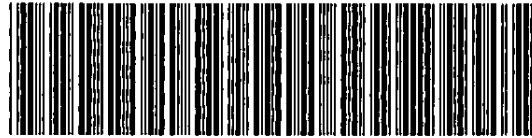
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

**SUBJECT:** Hahn Insurance Services, Incorporated  
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:

Douglas L. Hahn  
Name of Person  
Hahn Insurance Services, Incorporated  
Firm/Company  
6631 NW 43<sup>rd</sup> Terrace  
Address  
Boca Raton, FL 33496  
City/State and Zip code  
d\_hahn@frontiernet.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Douglas L. Hahn at (402) 563-1565  
Name of Person 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

**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. Hahn Insurance Services, Incorporated  
(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. Nebraska 3. 47-0809246  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. February 6, 1998 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. 6631 NW 43rd Terrace, Boca Raton, FL 33496  
(Principal office address)

6631 NW 43rd Terrace, Boca Raton, FL 33496  
(Current mailing address)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Douglas L Hahn

Office Address: 6631 NW 43rd Terrace  
Boca Raton, Florida 33496  
(City) (Zip code)

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9. 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.*

Douglas L. Hahn  
(Registered agent's signature)

10. 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.

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

**A. DIRECTORS**

Chairman: Douglas L. Hahn

Address: 6631 NW 43<sup>rd</sup> Terrace, Boca Raton, FL 33496

Vice Chairman: Nicole Hahn

Address: 6631 NW 43<sup>rd</sup> Terrace, Boca Raton, FL 33496

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

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

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

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

**B. OFFICERS**

President: Douglas L. Hahn

Address: 6631 NW 43<sup>rd</sup> Terrace  
Boca Raton, FL 33496

Vice President: Nicole Hahn

Address: 6631 NW 43<sup>rd</sup> Terrace  
Boca Raton, FL 33496

Secretary: Nicole Hahn

Address: 6631 NW 43<sup>rd</sup> Terrace, Boca Raton, FL 33496

Treasurer: Douglas L. Hahn

Address: 6631 NW 43<sup>rd</sup> Terrace, Boca Raton, FL 33496

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

12. Douglas L. Hahn  
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.

13. Douglas L. Hahn, President/Owner  
(Typed or printed name and capacity of person signing application)

# STATE OF NEBRASKA

United States of America,        } ss.  
State of Nebraska                }

Secretary of State  
State Capitol  
Lincoln, Nebraska

I, John A. Gale, Secretary of State of the  
State of Nebraska, do hereby certify that

## **HAHN INSURANCE SERVICES, INCORPORATED,**

**was duly incorporated under the laws of this state on February 6, 1998 and do  
further certify that no occupation taxes assessed are unpaid and no  
occupation taxes are delinquent; Articles of Dissolution have not been filed  
and said Corporation is in existence as of the date of this certificate.**

*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.*

In Testimony Whereof,



I have hereunto set my hand and  
affixed the Great Seal of the  
State of Nebraska on this date of

**July 25, 2014**

*John A. Gale*  
Secretary of State