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FOREIGN PROFIT/NONPROFIT CORPORATION

Global Insurance Management Company, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$70.00

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COMP., L.L.C.

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1250 South Pine Island Rond, Suite 300 Plantation, Florida 33324 (954) 923-1900 (954) 923-0019

Department of State Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: Application by Foreign Corporation for Authorization to Transact Business in Florida

To Whom It May Concern:

Enclosed for filing on behalf of Global Insurance Management Company, Inc., a Delaware corporation ("GIMC, Inc."), is an Application by Foreign Corporation for Authorization to Transact Business in Florida.

Global Insurance Management Company, L.L.C., a Florida limited liability company (FEI number 161647591) ("GIMC, LLC"), is a wholly owned subsidiary of GIMC, Inc. GIMC, LLC hereby consents to GIMC, Inc.'s use of the name "Global Insurance Management Company, Inc." for the purpose of transacting business in Florida.

Thank you.

Respectfully submitted,

GLOBAL INSURANCE MANAGEMENT COMPANY, INC.

By: Name: Joshua M. Salman

Title: Chief Executive Officer

GLOBAL INSURANCE MANAGEMENT COMPANY, L.L.C.

By: Name: Joshua M. Salman

Title: Mahager

Enclosure

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.

(Enter name of corpora "Inc.," "Co.," "Corp."	tion; must include "INCORPORATE luc," "Co," or "Corp.")	., di	"COMPANY." "CORPORATION,"	
(If name unavailable in	Florida, enter alternate corporate nat	me a	idopted for the purpose of transacting business in Florida	-
Delaware		3.	47-1971933	_
(State or country unde	r the law of which it is incorporated))	(FEI number, if applicable)	_
September 30, 2014		5.	Perpetual	_
(Date of inc	orporation)		(Duration: Year corp. will cease to exist or "perpetual")	_
250 South Pine Island		7.15	Florida, if prior to registration) 602, F.S., to determine penalty liability)	_
	(Principal office		CS5)	-
1250 South Pine Island	Road, Suite 300 Plantation, FL 333		,	
	(Current mailing	addı	ress)	-
Name and <u>street add</u> Name:	ress of Florida registered agent: (C T Corporation System	(P.C). Box NOT acceptable)	14 DEC 31
fice Address:	1200 South Pine Island Road			7
	Plantation		, Florida 33324 (Zip code)	င္မာ ယ
	(City)		(Zip code)	Š
signated in this appl ther ogree to compl ties, and I om famili	registered agent and to accept si ication, I hereby accept the appo y with the provisions of all statut	inti les t	ive of process for the above stated corporation at the ment as registered agent and agree to act in this capelative to the proper and complete performance of f my position as registered agent. [Additional of the proper and complete performance of the position as registered agent.]	acit,
4,	$\Gamma W \Lambda^{-1} M \Lambda^{-1}$	$\pi \prime \prime$	Assistant Secretary	

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. Nan	nes and business addresses of officers and/or directors:		
	ECTORS		
Chairman	Not Applicable		
Address:			_
Vice Chai	irman:	<u>,</u>	_
Address:			_
			_,
Director:	Joshua M. Salman		 -
Address:	1250 South Pine Island Road, Suite 300 Planation, Florida 33324		_
			Ü
Director:	David W. Lester	7 0	ISTA!@
Address:	1250 South Pine Island Road, Suite 300 Planation, Florida 33324	03	
			F CONT
B. OFF	ICERS		
President:	Not Applicable	ယ္သ	(S) (A)
		S	
Vice Presi	ident: David W. Lester	-	_
Address:	1250 South Pine Island Road, Suite 100, Planation, Florida 32224		
			_
Secretary:	David W. Lester		_
Address:	1250 South Pine Island Road, Suite 300 Planation, Florida 33324		_
Treasurer	David W. Lester		_
Address:	1250 South Pine Island Road, Suite 300 Planation, Florida 33324		_
	If necessary, you may attach an addendum to the application listing additional officers and/or directors.		
12	let m le vol		
	Signature of Director or Officer er or director signing this document (and who is listed in number 12 above) affirms that the facts stated it)	_
are true a	and that he or she is aware that false information submitted in a document to the Department of State con- egree felony as provided for in s.817.155, F.S.	stitute:	i
	ua M. Salman. Chief Executive Officer		
··	(Typed or printed name and capacity of person signing application)		_

Addendum - 11.B. Officers

Chief Executive Officer: Joshua M. Salman

Address: 1250 South Pine Island Road, Suite 300, Plantation, Florida 33324

SECRETARY OF STAIL BY DIVISION OF COST GRAPH BY

<u>Delaware</u>

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GLOBAL INSURANCE MANAGEMENT COMPANY, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTIETH DAY OF DECEMBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GLOBAL INSURANCE MANAGEMENT COMPANY, INC." WAS INCORPORATED ON THE THIRTIETH DAY OF SEPTEMBER, A.D. 2014.

SECRETARY OF STATE DIVISION OF CONFORATIONS



AUTHENTICATION: 1998152

DATE: 12-30-14

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