

F1500002272

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

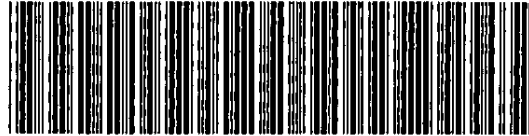
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FILED
15 MAY 22 AM 10:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 2 6 2015

S. GILBERT

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Motorists Service Corporation

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:

Charles R. Gaskill

Name of Person

Motorists Mutual Insurance Company

Firm/Company

471 East Broad Street

Address

Columbus, Ohio 43215

City/State and Zip code

chuck.gaskill@motoristsgroup.com

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

For further information concerning this matter, please call:

Charles Gaskill

Name of Person

at (614) 225-8593

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 6, 2015

CHARLES R. GASKILL
471 EAST BROAD STREET
COLUMBUS, OH 43215

SUBJECT: MOTORISTS SERVICE CORPORATION
Ref. Number: W15000032218

We have received your document for MOTORISTS SERVICE CORPORATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected original and one copy of 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.

Sylvia Gilbert
Regulatory Specialist II
New Filing Section

Letter Number: 615A00009475

**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. Motorists Service Corporation

(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. Ohio 3. 31-0851906

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

(FEI number, if applicable)

4. September 17, 1974

5. Perpetual

(Date of incorporation)

(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. 471 East Broad Street

(Principal office address)

Columbus, OH 43215

(Current mailing address)

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

Name: Brian Fleming

Office Address: 2 Tarrington Circle

Palm Beach Gardens

(City)

, Florida 33418

(Zip code)

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.



(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.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: David L. Kaufman

Address: 471 East Broad Street
Columbus, OH 43215

Vice Chairman: _____

Address: _____

Director: Susan E. Haack

Address: 471 East Broad Street
Columbus, OH 43215

Director: _____

Address: _____

B. OFFICERS

President: David L. Kaufman

Address: See above

Vice President: _____

Address: _____

Secretary: Anne B. King

Address: 471 East Broad Street; Colubus, OH 43215

Treasurer: Susan E. Haack

Address: see above

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

12. Anne B. King
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. Anne B. King

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