

F15000003529

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

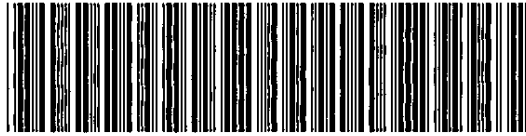
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600274732266

07/06/15--01010--007 **70.00

FILED
15 JUN 21 PM 4:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 10 2015

Y SULKER

W15000046343

COVER LETTER

TO: Registration Section
Division of Corporations
Corcoran & Havlin Insurance Group, Inc.

SUBJECT: _____
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:
Dianne Wharton

| | |
|---------------------------|--|
| | Name of Person |
| Cross Insurance | |
| | Firm/Company |
| PO Box 1388 | |
| | Address |
| Bangor, ME 04402 | |
| | City/State and Zip code |
| nlarcombe@crossagency.com | |
| | E-mail address: (to be used for future annual report notification) |

For further information concerning this matter, please call:

| | | | |
|----------------|--------------|--------------------------|-------|
| Alice Dyer | 207 | 947-7345 | |
| _____ | at (_____) | _____ | _____ |
| Name of Person | Area Code | Daytime Telephone Number | |

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration 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

RECEIVED

15 JUL 21 PM 3:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

July 9, 2015

DIANNE WHARTON
PO BOX 1388
BANGOR, ME 04402 US

RECEIVED JUL 20 '15

SUBJECT: CORCORAN & HAVLIN INSURANCE GROUP, INC
Ref. Number: W15000046343

We have received your document for CORCORAN & HAVLIN INSURANCE GROUP, INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

Please return 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) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 215A00014383

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.

Corcoran & Havlin Insurance Group, Inc.

1. (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)
Maine 47-3466605

2. (State or country under the law of which it is incorporated) 3. (FBI number, if applicable)
3/16/2015

4. (Date of incorporation) 5. perpetual (Date of duration, if other than perpetual)
upon registration

6. (Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 491 Main Street, Bangor, ME 04401 (Principal office address)

PO Box 1388, Bangor, ME 04402 (Current mailing address, if different)

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

Name: 1200 South Pine Island Road

Office Address: Plantation 33324, Florida (City) (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.

[Handwritten signature of Salma Amenta-Gray]
(Registered agent's signature)

SALMA AMENTA-GRAY
SPECIAL 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.

FILED
15 JUL 21 PM 4:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Royce M. Cross

Chairman: _____

491 Main Street, PO Box 1388

Address: _____

Bangor, ME 04402

Woodrow W. Cross

Vice Chairman: _____

491 Main Street, PO Box 1388

Address: _____

Bangor, ME 04402

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

John W Keefe

President: _____

287 Linden Street, PO Box 9011

Address: _____

Wellesley, MA 02482

Vice President: _____

Address: _____

Secretary: _____

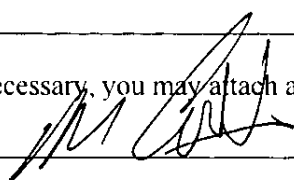
Address: _____

Treasurer: _____

Address: _____

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

12. _____



Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.

Royce M. Cross, Chairman

13. _____

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

FILED
15 JUL 21 PM 4:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

State of Maine



Department of the Secretary of State

I, the Secretary of State of Maine, certify that according to the provisions of the Constitution and Laws of the State of Maine, the Department of the Secretary of State is the legal custodian of the Great Seal of the State of Maine which is hereunto affixed and of the reports of organization, amendment and dissolution of corporations and annual reports filed by the same.

I further certify that CORCORAN & HAVLIN INSURANCE GROUP is a duly organized business corporation under the laws of the State of Maine and that the date of incorporation is March 16, 2015.

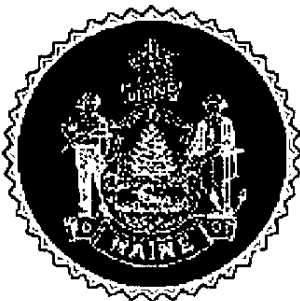
I further certify that on:

March 16, 2015 ARTICLES OF INCORPORATION were filed.

No further amendments have been filed to date.

I further certify that said business corporation has filed annual reports due to this Department, and that no action is now pending by or on behalf of the State of Maine to forfeit the charter and that according to the records in the Department of the Secretary of State, said corporation is a legally existing business corporation in good standing under the laws of the State of Maine at the present time.

In testimony whereof, I have caused the Great Seal of the State of Maine to be hereunto affixed. Given under my hand at Augusta, Maine, this second day of July 2015.



A handwritten signature in black ink, appearing to read "Matthew Dunlap", written over a horizontal line.

Matthew Dunlap
Secretary of State