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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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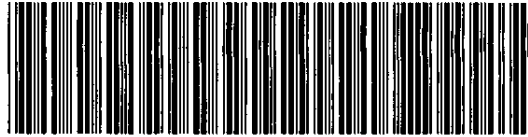
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/15/16--01003--019 **78.75

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16 JAN 26 AM 8:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 27 2016

J SHIVERS



Insurance Compliance Center

January 12, 2016

Registration Section
Florida Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: **Application for Foreign Authority; T & D Aloia, Inc.**

Dear Sir or Madam:

Please find enclosed with this letter what we believe to be a complete and accurate Application by A Foreign Corporation For Authorization To Transact Business in Florida on behalf of DHC Insurance, LLC along the necessary fees and attachments.

Based on the above, I would like to respectfully request your review of the enclosed materials and if all meets with your approval, the issuance of their Foreign Authority. During your review, should you find you have questions, please feel free to contact us as our company has been retained to represent T & D Aloia, Inc. in this matter.

I do appreciate your assistance in this matter and look forward to your response.

Respectfully,

Alison Klein
Insurance Licensing Specialist
Insurance Compliance Center, Inc.
Alison@inscomply.com

AGK: sm
Enclosure

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: T & D Aloia, 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:

Alison Klein

Name of Person

Insurance Compliance Center, Inc.

Firm/Company

1 Diamond Causeway, Suite 21265

Address

Savannah, GA 31406

City/State and Zip code

alison@inscomply.com

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

For further information concerning this matter, please call:

Alison Klein

Name of Person

at (912)

Area Code

353-7013

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

**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. T & D Aloia, 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. New York 3. 11-2656751
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 08/17/83 5. _____
(Date of incorporation) (Date of duration, if other than 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. 7801 5th Avenue, Brooklyn, NY 11209
(Principal office address)
- _____
(Current mailing address, if different)

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

Name: National Corporate Research, Ltd., Inc.

Office Address: 115 North Calhoun Street, Suite 4

Tallahassee, Florida 32301
(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.



Lucy Rose, Assistant Secretary
(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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11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: **Dean S. Aloia**

Address: **7801 5th Avenue, Brooklyn, NY 11209**

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: **Dean S. Aloia**

Address: **7801 5th Avenue, Brooklyn, NY 11209**

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.

13. _____

Dean S. Aloia

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

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16 JAN 26 AM 8:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**State of New York
Department of State } ss:**

I hereby certify, that the Certificate of Incorporation of T & D ALOIA INC. was filed on 08/17/1983, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

The Biennial Statement is past due.

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16 JAN 26 AM 8:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

·WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 28th day of December two
thousand and fifteen.

Anthony Giardina

Executive Deputy Secretary of State