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(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

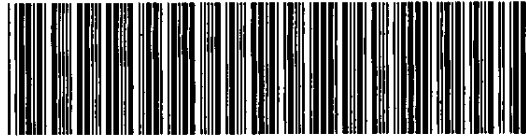
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



April 4, 2016

Via Federal Express Tracking #809915464167

Attn: Stacey Mason
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

RE: Family Security Insurance Company, Inc.

Dear Ms. Mason:

Please find the enclosed Application by Foreign Corporation for Authorization to Transact Business in Florida for review and processing. Pursuant to your instruction, the Chief Financial Officer of Florida has been named as the Registered Agent pursuant to Florida Statute §48.151(1) and the signature line for acceptance by the Registered Agent has been left blank.

Should you have any questions or need any additional information, please do not hesitate to contact me at (727) 895-7737 ext. 4854 or elamb@upcinsurance.com.

Sincerely,

Elena Lamb

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Family Security Insurance Company, 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:

Kimberly A. Salmon, Esq.

Name of Person

Family Security Insurance Company, Inc.

Firm/Company

800 2nd Avenue South

Address

St Petersburg, Florida 33701

City/State and Zip code

elamb@upcinsurance.com

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

For further information concerning this matter, please call:

Elena Lamb

727

895-7737 x 4854

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

**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. Family Security Insurance Company, 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. Hawaii 3. 45-2730143

(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 07/19/2011 5. _____

(Date of incorporation) (Date of duration, if other than 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. 800 2nd Avenue South, St Petersburg, FL 33701

(Principal office address)

(Current mailing address, if different)

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

Name: Chief Financial Officer
Office Address: 200 E. Gaines Street
Tallahassee, Florida 32399-0000

(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.

(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: Gregory C. Branch
800 2nd Avenue South
Address: St Petersburg, FL 33701

Vice Chairman: _____
Address: _____

Director:	<u>John L. Forney</u>	<u>Maureen A. Duffy</u>
Address:	<u>800 2nd Avenue South</u>	<u>800 2nd Avenue South</u>
	<u>St Petersburg, FL 33701</u>	<u>St Petersburg, FL 33701</u>

Director:	<u>Roy T. Yamamoto</u>
Address:	<u>800 2nd Avenue South</u>
	<u>St Petersburg, FL 33701</u>

B. OFFICERS

President: John L. Forney, President/CEO
800 2nd Avenue South
Address: St Petersburg, FL 33701

Vice President: _____
Address: _____

Secretary: Kimberly A. Salmon, Esq., Secretary/Chief Legal Officer
800 2nd Avenue South, St Petersburg, FL 33701
Address: _____

Treasurer: Bennett B. Martz, Treasurer/Chief Financial Officer
800 2nd Avenue South, St Petersburg, FL 33701
Address: _____

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

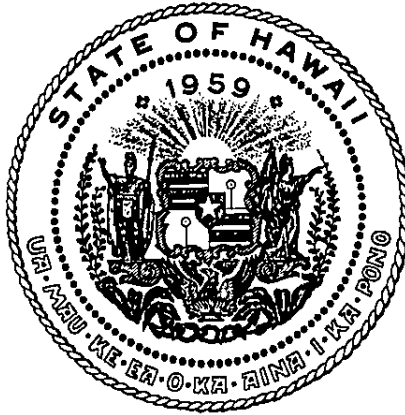
12. 
Signature of Director or Officer

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. Kimberly A. Salmon, Secretary/Chief Legal Officer

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Department of Commerce and Consumer Affairs

CERTIFICATE OF GOOD STANDING

I, the undersigned Director of Commerce and Consumer Affairs of the State of Hawaii, do hereby certify that according to the records of this Department,

FAMILY SECURITY INSURANCE COMPANY, INC.

was incorporated under the laws of Hawaii on 07/19/2011 ; and that it is an existing corporation in good standing, and is duly authorized to transact business.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of the Department of Commerce and Consumer Affairs, at Honolulu, Hawaii.

Dated: March 29, 2016

Director of Commerce and Consumer Affairs



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA