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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

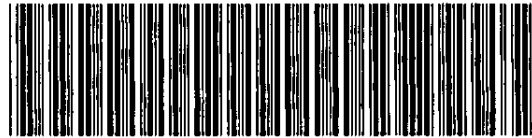
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

FEB 06 2017

Y SULKER



January 31, 2017

RE: Nebraska Life Assurance Company
UCAA Tracking Number: 77315-000
NAIC Company Code (Non-Active): 16046

Dear Sir or Madam;

We are providing the enclosed documents in response to a request by the State of Florida related to a recently filed UCAA Expansion Application by Nebraska Life Assurance Company ("NLAC").

In response to your request, we have provided the following documents:

- Certificate of Status (qualifying documents)
- Certificate of Good Standing

We have also enclosed a check for \$87.50 to cover the filing fee, certificate of status and certified copy.

We sincerely appreciate your assistance in this matter. Please contact Toby Horton with regard to any requirements you may have or if you have any questions.

Regards,

Toby Horton

Financial Regulatory Compliance
Aflac Worldwide Headquarters
1932 Wynnton Road
Columbus, GA 31999

Tel: 706.596.3545 | Fax: 706.660.7080
thorton@aflac.com | aflac.com

COVER LETTER

TO: Registration Section
Division of Corporations
Nebraska Life Assurance Company

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:
Emily Huss

| | |
|--|-------------------------|
| _____ | Name of Person |
| Bryan Cave LLP | |
| _____ | Firm/Company |
| 211 N. Broadway, Suite 3600 | |
| _____ | Address |
| St. Louis, MO 63102 | |
| _____ | City/State and Zip code |
| emily.huss@bryancave.com | |
| _____ | |
| E-mail address: (to be used for future annual report notification) | |

For further information concerning this matter, please call:

| | | |
|----------------|------------------|--------------------------|
| Emily Huss | 314 | 259-2307 |
| _____ | 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:

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee & Certified Copy | <input checked="" type="checkbox"/> \$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.*

Nebraska Life Assurance Company

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)

Nebraska 81-4298894

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

November 10, 2016

4. _____ 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)

10306 Regency Parkway Drive, Omaha, NE 68114

7. _____
(Principal office address)

(Current mailing address, if different)

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

Name: Corporation Service Company
1201 Hays Street

Office Address: Tallahassee 32301
(City) , Florida (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.

By: Lindsey Eick
(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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FLORIDA

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

A. DIRECTORS

Chairman: Daniel P. Amos

Address: 1932 Wynnton Road
Columbus, GA 31999

Vice Chairman: N/A

Address:

Director: Paul S. Amos, II

Address: 1932 Wynnton Road
Columbus, GA 31999

Director: Francis J. Barrett

Address: 10306 Regency Parkway Drive
Omaha, NE 68114-3743

B. OFFICERS

President: Paul S. Amos, II

Address: 1932 Wynnton Road
Columbus, GA 31999

Vice President:

Address:

Secretary: J. Matthew Loudermilk

Address: 1932 Wynnton Road, Columbus, GA 31999

Treasurer: Kenneth S. Janke

Address: 1932 Wynnton Road, Columbus, GA 31999

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CLERK
DEPT. OF STATE
FLORIDA

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. J. Matthew Loudermilk

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

ADDENDUM

Officers:

Daniel P. Amos
Paul S. Amos
Kriss Cloninger, III
Kenneth S. Janke
J. Matthew Loudermilk

Title:

Chairman
President
Executive Vice President
Treasurer
Secretary

Address:

1932 Wynnton Road, Columbus, GA 31999
1932 Wynnton Road, Columbus, GA 31999
1932 Wynnton Road, Columbus, GA 31999
1932 Wynnton Road, Columbus, GA 31999
1932 Wynnton Road, Columbus, GA 31999

Directors:

Daniel P. Amos
Paul S. Amos
Francis J. Barrett
Kriss Cloninger, III
Frederick J. Crawford
June P. Howard
Kenneth S. Janke
Douglas W. Johnson
Thomas J. Kenny
Charles B. Knapp

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1999
1932 WYNNTON RD
COLUMBUS, GA 31909

STATE OF NEBRASKA

United States of America, } ss.
State of Nebraska }

Secretary of State
State Capitol
Lincoln, Nebraska

I, John A. Gale, Secretary of State of the
State of Nebraska, do hereby certify that

NEBRASKA LIFE ASSURANCE COMPANY

**incorporated on November 10, 2016 and is duly incorporated under the law of
Nebraska;**

**that no occupation taxes due from and assessable against the Corporation are
unpaid and have become delinquent;**

**that no annual or biennial report required to be forwarded by the
Corporation to the Secretary of State has become delinquent;**

that Articles of Dissolution have not been filed.

*This certificate is not to be construed as an endorsement,
recommendation, or notice of approval of the entity's financial
condition or business activities and practices.*

In Testimony Whereof,

I have hereunto set my hand and
affixed the Great Seal of the
State of Nebraska on this date of

November 18, 2016



John A. Gale
Secretary of State