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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.  
Account Number : 110432003053  
Phone : (561)694-8107  
Fax Number : (561)694-1639

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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FOREIGN PROFIT/NONPROFIT CORPORATION

National Fidelity Insurance Agency, Inc.

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$78.75

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March 9, 2017

FLORIDA DEPARTMENT OF STATE

Division of Corporations

CORPORATE CREATIONS INTERNATIONAL, INC

SUBJECT: NATIONAL FIDELITY INSURANCE AGENCY, INC.  
REF: W17000019870

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet. We have received your electronically transmitted document. However, the document was submitted under the wrong electronic filing type and cannot be processed by this office.

To proceed, you must abandon this filing and resubmit your filing under the appropriate electronic filing type.

YOU SUBMITTED FEE FOR LLC 130.00,

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.

Shelia H Young  
Regulatory Specialist II

FAX Aud. #: H17000064996  
Letter Number: 917A00004542

**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. NATIONAL FIDELITY INSURANCE AGENCY, 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. DELAWARE**

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

**3. 47-4591813**

(FEI number, if applicable)

**4. JULY 17, 2015**

(Date of incorporation)

**5. PERPETUAL**

(Date of duration, if other than perpetual)

**6. UPON REGISTRATION**

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

**7. 401 E LAS OLAS BLVD., SUITE 1540, FORT LAUDERDALE, FL 33301**

(Principal office address)

**SAME AS PRINCIPAL OFFICE ADDRESS**

(Current mailing address, if different)

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

Name: **CORPORATE CREATIONS NETWORK, INC.**

Office Address: **11380 PROSPERITY FARMS RD. #221E**

**PALM BEACH GARDENS**

(City)

, Florida **33410**

(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.*



**Caitlin Lazarus, Special 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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TALLAHASSEE, FLORIDA

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

Chairman: DIRECTOR: CHARLES K. SCHUVER

Address: 401 E LAS OLAS BLVD., SUITE 1540

FORT LAUDERDALE, FL 33301

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: BRANDON C. DRISCOLL

Address: 401 E LAS OLAS BLVD., SUITE 1540

FORT LAUDERDALE, FL 33301

Director: GARY W. ROCHE

Address: 401 E LAS OLAS BLVD., SUITE 1540

FORT LAUDERDALE, FL 33301

**B. OFFICERS**

President: CHARLES K. SCHUVER

Address: 401 E LAS OLAS BLVD., SUITE 1540

FORT LAUDERDALE, FL 33301

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: GARY W. ROCHE

Address: 401 E LAS OLAS BLVD., SUITE 1540, FORT LAUDERDALE, FL 33301

Treasurer: BRANDON C. DRISCOLL

Address: 401 E LAS OLAS BLVD., SUITE 1540, FORT LAUDERDALE, FL 33301

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. BRANDON C. DRISCOLL, TREASURER AND DIRECTOR

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

# Delaware

The First State

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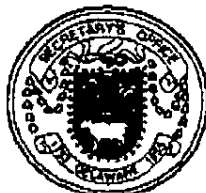
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NATIONAL FIDELITY INSURANCE AGENCY, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTH DAY OF MARCH, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NATIONAL FIDELITY INSURANCE AGENCY, INC." WAS INCORPORATED ON THE SEVENTEENTH DAY OF JULY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



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SR# 20171662005

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State

Authentication: 202161314

Date: 03-08-17