

F17000002546

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M. MILLIGAN

JUN 06 2017



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 23, 2017

DIANA MALDONADO  
C/O USRA  
11309 NW 44TH ST  
CORAL SPRINGS, FL 33065

SUBJECT: THE LIBERTY COMPANY INSURANCE BROKERS, INC.  
Ref. Number: W17000043706

We have received your document for THE LIBERTY COMPANY INSURANCE BROKERS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as registered agent in the document and the person signing as registered agent must be the same.

Please note that a person affiliated with the entity designated as registered agent must sign on behalf of the entity.

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.

Michelle Milligan  
Senior Section Administrator

Letter Number: 717A00010300

2017 JUN -5 AM 10:50

TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** The Liberty Company Insurance Brokers, 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:

Diana Maldonado

Name of Person

C/O USRA

Firm/Company

11309 NW 44th Street

Address

Coral Springs, FL 33065

City/State and Zip code

dmaldonado@usregisteredagents.com

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

For further information concerning this matter, please call:

Diana Maldonado

at ( 845 ) 398-0900 ex. 402

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    ☐ \$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. The Liberty Company Insurance Brokers, 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. California

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

3.

(FEI number, if applicable)

4. August 11, 2003

(Date of incorporation)

5. Perpetual

(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. 21820 Burbank Boulevard, Suite # 330, Woodland Hills, CA 91367

(Principal office address)

(Current mailing address, if different)

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

Name: NRAI Services, Inc.

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324

(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.*

NRAI Services, Inc.

By:

Suana Maldonado, Asst. Secy of NRAI  
(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: Bill Johnson

Address: 21820 Burbank Blvd., Suite 330  
Woodland Hills, CA 91367

Vice Chairman: Jerry Pickett

Address: 21820 Burbank Blvd., Suite 330  
Woodland Hills, CA 91367

Director: Joan Johnson

Address: 21820 Burbank Blvd., Suite 330  
Woodland Hills, CA 91367

Director: \_\_\_\_\_

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

**B. OFFICERS**

President: Jerry Pickett, CEO

Address: 21820 Burbank Blvd., Suite 330  
Woodland Hills, CA 91367

Vice President: Bill Johnson

Address: 21820 Burbank Blvd., Suite 330  
Woodland Hills, CA 91367

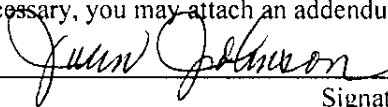
Secretary: Joan Johnson

Address: 21820 Burbank Blvd., Suite 330, Woodland Hills, CA 91367

Treasurer: Bill Johnson

Address: 21820 Burbank Blvd., Suite 330, Woodland Hills, CA 91367

**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. Joan Johnson, Secretary

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

**State of California**  
**Secretary of State**

**CERTIFICATE OF STATUS**

**ENTITY NAME:**

**THE LIBERTY COMPANY INSURANCE BROKERS, INC.**

**FILE NUMBER:** C2435658  
**FORMATION DATE:** 08/11/2003  
**TYPE:** DOMESTIC CORPORATION  
**JURISDICTION:** CALIFORNIA  
**STATUS:** ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California,  
hereby certify:

The records of this office indicate the entity is authorized to  
exercise all of its powers, rights and privileges in the State of  
California.

No information is available from this office regarding the financial  
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate  
and affix the Great Seal of the State of  
California this day of April 10, 2017.

**ALEX PADILLA**  
Secretary of State