

F70000004629

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

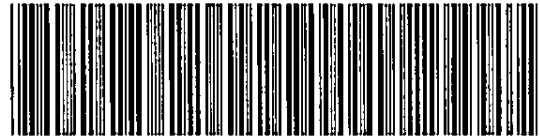
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600303400996

09/18/17--01002--019 **78.75

2017 OCT 12 AM 7:55

OCT 17 2017
J. HARRIS

Handwritten signature/initials

COVER LETTER

TO: Registration Section
Division of Corporations
CIA Insurance Agency, Inc.

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:
Courtney Wentworth

Name of Person
Cross Insurance

Firm/Company
PO Box 1388

Address
Bangor, ME 04401

City/State and Zip code
licensing@crossagency.com

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

For further information concerning this matter, please call:

Courtney Wentworth 207 947-7345

Name of Person at () _____
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



RECEIVED SEP 25 2017

FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 19, 2017

COURTNEY WENTWORTH
PO BOX 1388
BANGOR, ME 04401

SUBJECT: CIA INSURANCE AGENCY, INC.
Ref. Number: W17000074944

ALLAH, SEPT 11 2017

2017 OCT 12 PM 2:50

We have received your document for CIA INSURANCE AGENCY, 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):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Please return 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.

Jenna D Harris
Regulatory Specialist II

Letter Number: 117A00019039

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.

2017 OCT 12 AM 7:55

Jenna D Harris
Regulatory Specialist II

Letter Number: 117A00019039



September 27, 2017

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Name Consent for CIA Insurance Agency, Inc.

Dear Sir/Madame:

I am submitting this letter in support of CIA Insurance Agency, Inc.'s application for registration in the state of Florida (Ref. Number: W17000074944). CIA Insurance Agency, Inc., a Massachusetts corporation, is looking to register this name in Florida for use as an insurance agency. There appears to be a conflict with the name, and requires a written notice in regards to the dissolution of the Florida Corporation (P17000060532). CIA Insurance Agency, Inc. has no intention of revoking the dissolution, therefore, releasing the name to the new foreign filing (Ref. Number: W17000074944).

If there is anything further that you require, please feel free to call.

Sincerely,

A handwritten signature in black ink, appearing to read "Royce M. Cross", is written over a horizontal line.

Royce M. Cross
President
Cross Financial Corp.
CIA Insurance Agency, Inc.

**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.*

CIA Insurance Agency, Inc.

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)
Maine 81-3758552

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
08/12/2016

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)
491 Main Street, Bangor, ME 04401

7. _____
(Principal office address)
PO Box 1388, Bangor, ME 04402

(Current mailing address, if different)

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

C T Corporation System

Name:

1200 South Pine Island Road

Office Address:

Plantation,

33324

(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.

Tammy Tofteroo

Tammy Tofteroo

(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: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Royce M. Cross

491 Main Street

Address: Bangor, ME 04401

Director: _____

Address: _____

B. OFFICERS

President: Royce M. Cross

491 Main Street

Address: Bangor, ME 04401

Vice President: Jonathan M. Cross

491 Main Street

Address: Bangor, ME 04401

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. Royce M. Cross, President

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

State of Maine



Department of the Secretary of State

I, the Secretary of State of Maine, certify that according to the provisions of the Constitution and Laws of the State of Maine, the Department of the Secretary of State is the legal custodian of the Great Seal of the State of Maine which is hereunto affixed and of the reports of organization, amendment and dissolution of corporations and annual reports filed by the same.

I further certify that CIA INSURANCE AGENCY, INC. is a duly organized business corporation under the laws of the State of Maine and that the date of incorporation is August 12, 2016.

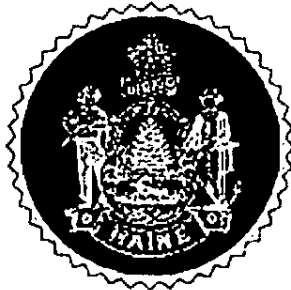
I further certify that on:

August 12, 2016 ARTICLES OF INCORPORATION were filed.
October 17, 2016 ASSUMED NAME was filed.

No further amendments have been filed to date.

I further certify that said business corporation has filed annual reports due to this Department, and that no action is now pending by or on behalf of the State of Maine to forfeit the charter and that according to the records in the Department of the Secretary of State, said corporation is a legally existing business corporation in good standing under the laws of the State of Maine at the present time.

In testimony whereof, I have caused the Great Seal of the State of Maine to be hereunto affixed. Given under my hand at Augusta, Maine, this twenty-seventh day of September 2017.



A handwritten signature in black ink, appearing to read "Matthew Dunlap", written over a horizontal line.

Matthew Dunlap
Secretary of State