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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : CAPITOL SERVICES, INC.
Account Number : 12016000017
Phone : (855) 498-5500
Fax Number : (800) 432-3622

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

Email Address: _____

**FOREIGN PROFIT/NONPROFIT CORPORATION
SCOTTISH AMERICAN INSURANCE GENERAL AGENCY,
INC.**

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$78.75

RECEIVED

2018 JUN 22 PM 1:23

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32399

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JUN 25 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Scottish American Insurance General Agency, 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:

Name of Person

Firm/Company

Address

City/State and Zip code

scook@scottishamerican.com

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

For further information concerning this matter, please call:

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

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. Scottish American Insurance General Agency, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ino.," "Co.," or "Corp.")
2. New York
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. February 29, 1980
(Date of incorporation)
5. _____
(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. 627 W. College Street, Grapevine, TX 75061
(Principal office address)
- _____ (Current mailing address, if different)

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

Name: Steven Cook

Office Address: 2600 Centennial Place

Tallahassee, Florida 32308
(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.

Steven A. Cook
(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: Paul Thomson

Address: 627 W. College Street, Grapevine, TX 75061

Director: _____

Address: _____

B. OFFICERS

President: Paul Thomson

Address: 627 W. College Street, Grapevine, TX 75061

Vice President: None

Address: _____

Secretary: Christian J. Henrich

Address: 1900 Main Place Tower, Buffalo, NY 14202

Treasurer: Steven A. Cook, CFO

Address: 627 W. College Street, Grapevine, TX 75061

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. Steven A. Cook, CFO

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

**State of New York
Department of State } ss:**

I hereby certify, that the Certificate of Incorporation of SCOTTISH AMERICAN INSURANCE GENERAL AGENCY, INC. was filed on 02/29/1980, under the name of BUCKINGHAM - MAIMIN AGENCY, LTD., with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation. I further certify the following:

A certificate changing name to BUCKINGHAM-VERDI, BADLER, INC. was filed on 12/22/1983.

A certificate changing name to BUCKINGHAM BADLER ASSOCIATES, INC. was filed on 12/30/1993.

A Biennial Statement was filed 08/04/2005.

A Biennial Statement was filed 03/07/2006.

A Certificate of Amendment was filed on 08/04/2006.

A Biennial Statement was filed 03/25/2008.

A Biennial Statement was filed 03/03/2010.

A Biennial Statement was filed 03/26/2012.

A certificate changing name to SCOTTISH AMERICAN INSURANCE GENERAL AGENCY, INC. was filed on 01/03/2014.

A Biennial Statement was filed 08/12/2014.

A Certificate of Amendment was filed on 09/04/2015.

A Biennial Statement was filed 02/05/2016.

A Biennial Statement was filed 02/20/2018.

I further certify that no other documents have been filed by such corporation.

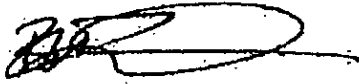
*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 21st day of June
two thousand and eighteen.*



www.dolny.gov

Taylor Seay 8004323522

(07/07) 06/22/2018 11:28:46 AM
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A handwritten signature in black ink, appearing to read 'B. Fitzgerald', with a long horizontal stroke extending to the right.

Brendan W. Fitzgerald
Executive Deputy Secretary of State

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