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(Requestor's Name)

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(Address)

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AUG 02 2018

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Hedgehog Insurance Agency Ltd  
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:

Pamela Collins  
Name of Person

Hedgehog Insurance Agency Ltd  
Firm Company

320 Pensacola Place, Unit 117  
Address

Douglas GA 30030  
City State and Zip code

pcollins@hedgehog-ins.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Pam Collins at 734 645-5050  
Name of Person Area Code Daytime Telephone Number

### STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Chilton 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

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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. Hedgehog Insurance Agency ~~Inc.~~ Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.,"

Hedgehog Insurance Agency Co.  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Georgia : 82-1673061  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 5-24-2017 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

6. New - no business yet  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 220 Ponce de Leon Place, Unit 117 Decatur, GA  
(Principal office address) 30030

Samy  
(Current mailing address, if different)

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

Name: Paracorp Incorporated

Office Address: 155 Office Plaza Drive, 1st Floor  
Tallahassee Florida FL  
(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.

[Signature] Assistant 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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11. Names and business addresses of officers and or directors:

**A. DIRECTORS**

Chairman: David Ezekiel

Address: 13 McGalls Bay Rd  
Smiths FHO5 Bermuda

Vice Chairman: Pamela Collins

Address: 2575 McKinnon Drive  
Decatur, GA 30030

Director: David Ezekiel

Address: 13 McGalls Bay Rd  
Smiths FHO5 Bermuda

Director: Pamela Collins

Address: 2575 McKinnon Drive  
Decatur, GA 30030

**B. OFFICERS**

President: David Ezekiel

Address: Same as above

Vice President: N/A

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

Secretary: David Ezekiel

Address: Same as above

Treasurer: Pamela Collins

Address: Same as above

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. Pamela Collins

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. Pamela Collins, CEO

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

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TALLAHASSEE FLORIDA

# STATE OF GEORGIA

## Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

### CERTIFICATE OF EXISTENCE

I, **Brian P. Kemp**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

#### **Hedgehog Insurance Agency Ltd**

a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 16007682  
Date Inc/Auth/Filed: 05/24/2017  
Jurisdiction : Georgia  
Print Date : 07/09/2018  
Form Number : 211



Brian P. Kemp  
Secretary of State