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(Re	equestor's Name)	
(Ad	Idress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO: Registration Section Division of Corporation	ons				
SUBJECT: UTIC Insurance					
	Name of	corporation -	must include suffix		
Dear Sir or Madam:					
The enclosed "Application by "Certificate of Existence," or above referenced foreign corp	"Certificate of	Good Stand	ling" and check are sub		
Please return all corresponden	ce concerning	this matter	to the following:		
Richene Oliver					
		Name of P	erson		
Adams and Reese LLP					
	-	Firm/Comp	any		
501 Riverside Avenue, Suite 6	i01				
		Addres	S		
Jacksonville, FL 32202					
	(City/State and	l Zip code		 2018
richene.oliver@arlaw.com				に に さま	<u>=</u> ¬
E-n	nail address: (1	to be used fo	r future annual report n	otification)	
For further information concer	ning this matt	er niesse ca	11.	SS	e n
To the control manufacture of the control	mig uns man	or, produce ou	•••	声 台	3 U
Richene Oliver	at	(904) 355-1700	<u> </u>	<u>~</u> €
Name of Person	at	Area Code	Daytime Teleph	ione Number	記 に
				قده. 	_
STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 3230	ons r Circle 1		MAILING AI Registration Se Division of Co P.O. Box 6327 Tallahassee, FI	ection rporations	
Enclosed is a check for the fol	lowing amoun	it:			
	78.75 Filing F Certificate of S		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Stat 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.

(If name unavail	able in Florida, enter alternate corporate name a	adopted for the purpose of transacting b	ousiness in Florida)	
2. Alabama	3.	63-0477090		
	y under the law of which it is incorporated)	(FEI number, if appli	icable)	
4. January 31, 19	964 5.	5. perpetual		
(Date	of incorporation)	(Date of duration, if other than perpetual)		
6. upon approval				
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	i Florida, if prior to registration) 502, F.S., to determine penalty liability)	
- 450 Diversibation				
7,450 Riverchase	Parkway East, Birmingham, AL 35244 (Princip	oal office address)		
450 Pivarchass	Parkway East, Birminoham, AL 35244			
450 1((Ve) C(1830	(Current mailir	ng address, if different)	201 SE	
8. Name and stre	et address of Florida registered agent: (P.C). Box <u>NOT</u> acceptable)	LAHASS	
Name:	C T Corporation System		ندار. در این	-
Office Address:	1200 South Pine Island Road		PH 2: 1 Of \$14 Of LOSE	21 May 27
	Plantation	Florida <u>33324</u>	50 E	
		(Zip code)		
	(City)	(m) code		

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: Timothy Vines Address: 450 Riverchase Parkway East Birmingham, AL 35244 Director: Dow Briggs, M.D. Address: 450 Riverchase Parkway East Birmingham, AL 35244 Director: Michael L. Patterson Address: 450 Riverchase Parkway East Birmingham, AL 35244 Director: Cynthia M. Vice Address: 450 Riverchase Parkway East Birmingham, AL 35244 **B. OFFICERS** President: Timothy Vines Address: 450 Riverchase Parkway East Birmingham, AL 35244 Matthew Moor Vice President: Dow Briggs, M.D. Address: 450 Riverchase Parkway East 450 Riverchase Parkway East Birmingham, AL 35244 Birmingham, AL 35244 Secretary: Michael L. Patterson Address: 450 Riverchase Parkway East, Birmingham, AL 35244 Treasurer: Cynthia M. Vice Address: 450 Riverchase Parkway East, Birmingham, AL 35244 NOTE: If necessary, you may attach ap addengum to the application listing additional officers and/or directors.

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.

Signature of Director or Officer

account All and Dispeter

John H. Merrill Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that UTIC Insurance Company was formed in Jefferson County, Alabama on January 31, 1964. The Alabama Entity Identification number for this entity is 014-623. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



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In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

08/09/2018

Date

X. W. Menill

John H. Merrill

Secretary of State