12/4/2018



# Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number

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Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (614)280-3338

Fax Number

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

ail.	Address			

### FOREIGN PROFIT/NONPROFIT CORPORATION

## MidSouth Mutual Insurance Company

Certificate of Status	0
Certified Copy	l
Page Count	05
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu



### APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN

(If name unavai	lable in Florida, enter alternate corporate name adopted for the purpose of tra	amacting business in Pletida)	
Termosnoc	20-5072333 3.		
February 21, 20		if applicable)  If other than perpotual)	
•	ate of Incorporation) (Date of duration, conducted as of registration date	it bater that per poemay	
	ocided affairs in Florids if prior to registration. See sections 617,1501 & 617,1502	I.F.S. to determine penalty lightlity.)	
	inental Place, Brentwood, TN 37027	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
7	(9/naipal office address)		
	• -		
104 Conti	nental Place, Brentwood, TN 37027		
	(Current mailing address, if different)		
All lawful busi	11085		~1
	corporation authorized in home state or country to be carried out in the state of	of Plotida)	
9. Name and str	cet address of Florida registored agent: (P.O. Box NOT acceptable)		iT
Name:	CFO of the Department of Financial Services	54 =	
Office Address:	200 East Gaines Street	AM II: 34	
Office Madress.	Tallahassee	12	
	(City)	(7.lp Code)	
Having been no designated in the	I agent's acceptance: amod as registered agent and to accept service of process for the abo his application, I hereby accept the appointment as registered agent o comply with the provisions of all statutes relative to the proper and a familiar with and accept the obligations of my position as register	d complete performance of my	ce A. I
	na		
	(Registered agent's signature)		

<sup>11.</sup> 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.

. . .

12. Names and addresses of officers and/or directors		
A. DIRECTORS		
SEE ATTACHED		
Chairman:		-
Address:		-
		•-
Vice Chahrman:		_
Address:		_
		_
Director:		
Address:		
		_
Director:		<del>_</del>
Address:		
Address:		_
B. OFFICERS	<b>3</b> .1	
John B. Downey, Jr. President: 6949 Charlotte Pike, #206		_ਛੋਂ
6948 Charlotte Pike, #206 Address:	وأنتر معر	
Nashville, Tennessee 37209	80 %.	1 mm
None		# 1
Vice President:	77:	
Address:	·	e C
		<del>မ</del>
James R. Carbine Secretary:	·	
621 Bracley Court, Franklin, Tennessee 37067		
Aldress:		
Tressurer: 621 Bradley Court, Franklin, Tennessee 37067		
Address:		<del></del>
A	in a Little and a Misses and/or disappose	
NOTE: If necessary, you will attach an addendum to the application lis	ang samuonar ornoers and or directors.	
13. (Signiture of Chairman, Vice Chairman, or any officer listed	in number 12 of the application)	
John By Downey, Jr., Preskient and Chairman Pithe Board of Direct	1000 Chairman L Pron	للومل
(Signature of Chairman, Vice Chairman, or any officer listed  John B. Downey, Jr., President and Chairman pithe Board of Direct  14. (Typed or printed name and capacity of pesson	signing application)	, <del>-</del> •

# MIDSOUTH MUTUAL INSURANCE COMPANY DIRECTORS (05 Of June 14, 2018)

John B. Downey, Jr., Chaliman 6949 Charlotte Plke, #208 Nashville, Tennessee 37209

James R. Carbine 621 Bradley Court Franklin, Tennessee 37067

Darryl R. McCubbin 804 Waldon Drive Franklin, Tennessee 37064

Stephen D. Wright 1500 Lauderdale Memorial Highway Charleston, Tennessee 37310

Robert N. Hutcheson 6535 Robertson Avenue Nashville, Tennessee 37209

Donald G. Chambers 5875 SE Tater Peeler Road Lebanon, Tennessee 37090

Tonya G. Jones 617 Dorshire Lane Nashville, Tennessee 37221

C:\Users\Everatt5\Documents\Fl'es\MMK (Muw)\Expansion Director List El.dock

SECRETARY OF STATE PARISH



### Tre Hargett Secretary of State

## Division of Business Services Department of State

State of Tennessee 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

November 30, 2018

WOLTERS KLUWER 118 W EDWARDS STE 200 SPRINGFIELD, IL 62704

Request Type: Certificate of Existence/Authorization

Request #: 0297890

Issuance Date: 11/30/2018 Copies Requested:

Document Receipt

Receipt #: 004395731

Filing Fee: \$20.00

Payment-Credit Card - State Payment Center - CC #: 3744856577

\$20.00

Regarding:

MidSouth Mutual Insurance Company

Filing Type:

Nonprofit Corporation - Domestic

Formation/Qualification Date: 02/21/2006

Status:

Active

Duration Term: Perpetual

Business County: WILLIAMSON COUNTY

Control #:

513898

Date Formed: 02/21/2006

Inactive Date:

Formation Locale: TENNESSEE

### CERTIFICATE OF EXISTENCE

I. Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effe the issuance date noted above

#### MidSouth Mutual Insurance Company

- \* is a Corporation duly incorporated under the law of this State with a date of incorporation duration as given above;
- \* has paid all fees, interest, taxes and penalties owed to this State (as reflected in:the records the Secretary of State and the Department of Revenue) which affect the existence at the department of Revenue which affect the existence at the contract of the secretary of State and the Department of Revenue) which affect the existence at the contract of the secretary of State and the Department of Revenue) which affect the existence at the secretary of State and the Department of Revenue) which affect the existence at the secretary of State and the Department of Revenue (secretary of State and State of the business;
- \* has filed the most recent annual report required with this office:
- \* has appointed a registered agent and registered office in this State;
- \* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Secretary of State

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