

F18000005664

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

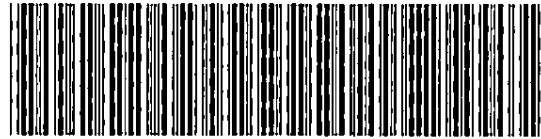
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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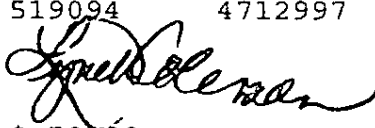
CLERK OF STATE
TALLAHASSEE, FL

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CLERK OF STATE
TALLAHASSEE, FL

DEC 11
S. PRATHER

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 519094 4712997
AUTHORIZATION : 
COST LIMIT : \$ 70.00

ORDER DATE : December 7, 2018
ORDER TIME : 12:21 PM
ORDER NO. : 519094-040
CUSTOMER NO: 4712997

FOREIGN FILINGS

NAME: STATE FARM INVESTMENT
MANAGEMENT CORP.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Croft -- EXT# 62925

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

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:

Name of Person

Firm/Company

Address

City/State and Zip code

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. State Farm Investment Management Corp.
(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)

2. Delaware 3. 37-0902469
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 12/09/1966 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)

6. 12/01/2018
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. One State Farm Plaza D-2, Bloomington IL 61710
(Principal office address)

(Current mailing address, if different)

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

Name: Corporation Service Company
1201 Hays Street
Office Address: Tallahassee 32301
_____, Florida _____
(City) (Zip code)

Registered agent's acceptance:

*Having been named as registered agent and to accept service of process for the above stated corporation at the place
signated 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.*

Corporation Service Company

By: Emily Croft
(Registered agent's signature)

Emily Croft
Asst. Vice President

Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to
Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction
the law of which it is incorporated.

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11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: See attached

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: See attached

Address: _____

Vice President: _____

Address: _____

Secretary: _____

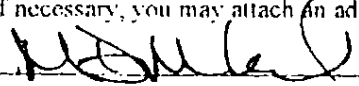
Address: _____

Treasurer: _____

Address: _____

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



Signature of Director or Officer

I, 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.

Mark D Mikel, Vice President -Financial

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

STATE FARM INVESTMENT MANAGEMENT CORP.
List of Directors and Officers
2/10/2018

Name	Title	Mailing Address
Michael L Tipsord	Director & President	One State Farm Plaza Bloomington, IL 61710-0001
Paul J Smith	Director & Sr Vice President	One State Farm Plaza Bloomington, IL 61710-0001
Joe R Monk Jr	Director & Sr Vice President	One State Farm Plaza Bloomington, IL 61710-0001
Rand Harbert	Director & Sr Vice President	One State Farm Plaza Bloomington, IL 61710-0001
Lisa Stewart	Director & Vice President	One State Farm Plaza Bloomington, IL 61710-0001
Joseph Young	Vice President	One State Farm Plaza Bloomington, IL 61710-0001
Mark D Mikel	Vice President-Financial & Secretary	One State Farm Plaza Bloomington, IL 61710-0001
Julie Hoyer	Assistant Vice President	One State Farm Plaza Bloomington, IL 61710-0001
John Malito	Assistant Vice President	One State Farm Plaza Bloomington, IL 61710-0001
Robert Reardon	Assistant Vice President	One State Farm Plaza Bloomington, IL 61710-0001
Lisa Rogers	Assistant Vice President	One State Farm Plaza Bloomington, IL 61710-0001
Michael Zarogian	Assistant Vice President	One State Farm Plaza Bloomington, IL 61710-0001
Scott Hintz	Assistant Vice President	One State Farm Plaza Bloomington, IL 61710-0001
Corey Schieler	Assistant Vice President	One State Farm Plaza Bloomington, IL 61710-0001
Terrence Ludwig	CCO, Treasurer, AMT & OFAC Officer	One State Farm Plaza Bloomington, IL 61710-0001
David M Moore	Assistant Secretary	One State Farm Plaza Bloomington, IL 61710-0001
Kim Cimoch	Assistant Secretary	Three State Farm Plaza

Bloomington, IL 61791-0001

Steve Glazebrook

Assistant Secretary

Three State Farm Plaza
Bloomington, IL 61791-0001

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "STATE FARM INVESTMENT MANAGEMENT CORP." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTH DAY OF DECEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "STATE FARM INVESTMENT MANAGEMENT CORP." WAS INCORPORATED ON THE NINTH DAY OF DECEMBER, A.D. 1966.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



650207 8300

SR# 20188033853

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 204052031

Date: 12-07-18