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| (Re | questor's Name) | | | | |
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| (Ad | dress) | | | | |
| (Ad | dress) | | | | |
| (Cit | y/State/Zip/Phone | · #) | | | |
| PICK-UP | ☐ WAIT | MAIL | | | |
| (Bu | siness Entity Nam | ne) | | | |
| (Document Number) | | | | | |
| Certified Copies | _ Certificates | of Status | | | |
| Special Instructions to Filing Officer: | | | | | |
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03/19/13--01031--018 **78.75



326-19

*** PROMPT ATTENTION REQUESTED ***

3/13/2019

Corp. Div. FL Secy. of State P.O. Box 6327 Tallahassee, FL 32314

Re: I.C.S. Agency, Inc.

Enclosed are the necessary applications to qualify the above referenced foreign corporation. Included are check(s) in the amount of \$78.75.

This corporation is anxious to obtain an insurance license in your state. Therefore, please process their application as soon as possible and forward the approved duplicate copy (if applicable) and Certificate of Authority to my attention.

If you have any questions or require additional information, please contact me at 214-855-0737. Your cooperation and prompt attention to this request is greatly appreciated.

Sincerely, Kennedy Licensing Service, Inc.

Hailey Overby

Hailey Overby

Treasurer & Initial Licg, Spec.

Email: hoverby@kennedylicensing.com

Enc: \$78.75 fee, App. in dup.,, Cert. G.S.

COVER LETTER

| TO: | Registration Se Division of Co | | • | | | |
|---|-----------------------------------|----------------------------------|--|-------------|----------------------------|---|
| SUBJ | I.C.S. Ag | ency, Inc. | | | | |
| 3010 | ECT | Name | of corporatio | n - must | include suffix | |
| Dear S | Sir or Madam: | | | | | |
| "Certi | ficate of Existence | | of Good Sta | ınding" a | nd check are sub | nct Business in Florida," comitted to register the |
| | return all corres EY OVERBY | pondence concern | ing this matte | er to the f | following: | |
| | | | Name of | Person | - " | |
| KENN | EDY LICENSING | SERVICE | | | | |
| 4144 N | CENTRAL EXP | WY STE 800 | Firm/Cor | npany | | |
| | | | Addı | ress | | |
| DALL | AS, TX 75204 | | | | | |
| UOVE | THE DV OVENINE IN | YLICENSING.COM | City/State | and Zip c | ode | |
| HOVE | | | | for futur | e annual report | notification) |
| For fu | rther information | concerning this n | | | v annua repert | e.m. |
| HAILEY OVERBY 214 | | 214 at (| 855-0737 | | | |
| | Name of Perso | on | Area Coo | / de | Daytime Telep | phone Number |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | | S: | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | | |
| Enclos | sed is a check for | the following amo | ount: | | | |
| □ \$70 | 0.00 Filing Fee | ☐ \$78.75 Filin Certificate o | | | 5 Filing Fee & ied Copy | □ \$87.50 Filing Fee, Certificate of Status & |

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.

| I.C.S. Agency, I | inc. | | | |
|-------------------|--|--|--------------------|--|
| (Enter name of c | orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.") | COMPANY," "CORPORATION," | | |
| (If name unavails | able in Florida, enter alternate corporate name ad | opted for the purpose of transacting bus | siness in Florida) | |
| 2 3. | | | | |
| 12/18/1970 | y under the law of which it is incorporated) | (FEI number, if applica | | |
| UPON FILING | of incorporation) | (Date of duration, if other than perpetual) | | |
| | (Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150) T. FARMINGDALE, NY 11735-2612 | lorida, if prior to registration) 2, F.S., to determine penalty liability) | | |
| | (Principal | office address) | | |
| SAME AS ABO | VE | | | |
| | (Current mailing | address, if different) | 2019 H. | |
| 8. Name and stree | et address of Florida registered agent: (P.O. | Box NOT acceptable) | 7 | |
| Name: | REGISTERED AGENT SOLUTIONS, INC. | | .0 | |
| Office Address: | 155 OFFICE PLAZA DR. SUTTE A | | 28 4: 0: | |
| | TALLAHASSEE. | 32301 Florida | 07 | |
| | (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.

(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 MORTON APPELBAUM Chairman: 81 EASTGATE DR HUNTINGTON, NY 11743 Address: _ Address: ____ _ _ _ _ _ _ _ _ _ _ ___ **B. OFFICERS** MORTON APPELBAUM 81 EASTGATE DR HUNTINGTON, NY 11743 Address: _ Vice President: -- MORTON APPELBAUM Secretary: 81 EASTGATE DR HUNTINGTON, NY 11743 Address: _ MORTON APPELBAUM Treasurer: ___ 81 EASTGATE DR HUNTINGTON, NY 11743 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Morton Graelle 2-19-2019 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. MORTON APPELBAUM, PRESIDENT

(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 I. C. S. AGENCY, INC. was filed on 12/18/1970, 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.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 28th day of February two thousand and nineteen.

Whitney Clark

Deputy Secretary of State