

3/31/2020

Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (514)280-3338
Fax Number : (954)208-0845

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

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION
HomeServe Insurance Agency Corp.

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

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Corporate Filing Menu

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DocuSign Envelope ID: 8E47F255-3F5B-4BFA-9091-FE23517A0970

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. HomeServe Insurance Agency Corp.
(Enter name of corporation, must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. California 3. 42-1706343
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 04/24/2006 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. Upon filing
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 601 Merritt 7, 6th Floor, Norwalk, CT 06851
(Principal office address)
- (Current mailing address, if different)

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

Name: C.T. Corporation System

Office Address: 1206 South Pine Island Road

Plantation, Florida 33324
(City) (Zip code)

2020 MAR 31 AM

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.

Michele Holden, Asst Sect

By: Michele Holden
(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: SEE ATTACHED

A. DIRECTORS

Chairman _____

Address: _____

Vice Chairman _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____
_____**B. OFFICERS SEE ATTACHED**

President _____

Address: _____

Vice President _____

Address: _____

Secretary _____

Address: _____

Treasurer _____

Address: _____
_____**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.12. Richard Gannon

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. Richard Gannon cfo

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

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Officer Attachment

Address for all:
601 Merritt 7, 6th Floor
Norwalk, CT 06851

John Kitzie
Director

Richard Gannon
Director

Michael Backus
President

William Eller
Vice President

Mark Slater
General Manager

Graeme Sandford
Treasurer

Hilary Glassman
Secretary

Lynn Gefen
Assistant Secretary

Michael Fahey
Assistant Secretary

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State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

HOMESERVE INSURANCE AGENCY CORP.

FILE NUMBER: C2875954
FORMATION DATE: 04/24/2006
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to
exercise all of its powers, rights and privileges in the State of
California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of March 18, 2020.

ALEX PADILLA
Secretary of State