

F20000002735

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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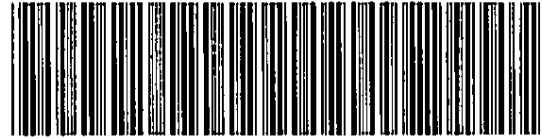
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/16/20--01022--013 **78.75

15 JUN 2014
BIC 91147
FILED

JUN 17 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Toggle Insurance Company

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:

Luisa Nubaravacharyan

Name of Person

Farmers Insurance

Firm/Company

6301 Owensmouth Ave.

Address

Woodland Hills, CA 91367

City/State and Zip code

luisa.nubaravacharyan@farmersinsurance.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Luisa Nubaravacharyan

at (818) 965-0425

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$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. Toggle Insurance Company
(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. 13-3551577
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 9/21/1989 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. N/A
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 3 Beaver Valley Road Wilmington, DE 19803
(Principal office street address)
- 6301 Owensmouth Ave. Woodland Hills, CA
(Current mailing address, if different)

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

Name: Chief Financial Officer

Office Address: 200 E. Gaines St.

Tallahassee, Florida 32399
(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.

Per Statute 624.422

(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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

☐ Chairman Name: Stephanie Taylor Lloyd
☐ Vice Chairman Address: 6303 Owensmouth Ave.
☒ Director Woodland Hills, CA 91367
☒ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Doren Eugene Hohl
☐ Vice Chairman Address: 6301 Owensmouth Ave.
☐ Director Woodland Hills, CA 91367
☐ President _____
☐ Vice President _____
☒ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

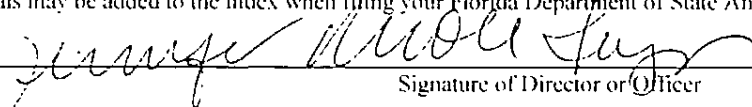
☐ Chairman Name: Robert Paul Howard
☐ Vice Chairman Address: 6301 Owensmouth Ave.
☐ Director Woodland Hills, CA 91367
☒ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: James Leslie Nutting
☐ Vice Chairman Address: 6301 Owensmouth Ave.
☐ Director Woodland Hills, CA 91367
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other Actuary ☐ Other _____

☐ Chairman Name: Thomas Sangkyu Noh
☐ Vice Chairman Address: 6301 Owensmouth Ave.
☐ Director Woodland Hills, CA 91367
☐ President _____
☒ Vice President _____
☐ Secretary ☒ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Jennifer Nicole Pryor
☐ Vice Chairman Address: 6301 Owensmouth Ave.
☐ Director Woodland Hills, CA 91367
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other Assistant Secretary ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. 
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. Jennifer Nicole Pryor, Assistant Secretary
(Typed or printed name and capacity of person signing application)

Application By Foreign Corporation for Authorization to Transact Business in Florida

Addendum

Directors:

Name: Guy Meade Hanson

Address: 6301 Owensmouth Ave. Woodland Hills, CA 91367

Name: Gail Nanette Jackson

Address: 6301 Owensmouth Ave. Woodland Hills, CA 91367

Name: Sherman Lenard Lewis, III

Address: 6301 Owensmouth Ave. Woodland Hills, CA 91367

Name: Ronald Lee Marrone

Address: 6301 Owensmouth Ave. Woodland Hills, CA 91367

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TOGGLE INSURANCE COMPANY" 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 FIFTEENTH DAY OF APRIL, A.D. 2020.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TOGGLE INSURANCE COMPANY" WAS INCORPORATED ON THE TWENTY-FIRST DAY OF SEPTEMBER, A.D. 1989.

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



2208357 8300

SR# 20202841610

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.

Authentication: 202771268

Date: 04-15-20