

F9500000264

Document Number Or

C T CORPORATION SYSTEM  
Requestor's Name  
1311 Executive Center Drive, Ste. 200  
Address  
Tallahassee, FL 32301 (904) 656-0220  
City State Zip Phone

500001882036  
-01/17/95--01076--016  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

CORPORATION(S) NAME

Insurance Advisors of America, Inc.

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|--|---|---|
| <input checked="" type="checkbox"/> Profit   | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merger             |
| <input type="checkbox"/> NonProfit           | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark               |
| <input checked="" type="checkbox"/> Foreign  | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Other              |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Reservation            | <input type="checkbox"/> Change of R.A.     |
| <input type="checkbox"/> Reinstatement       | <input type="checkbox"/> Photo Copies           | <input type="checkbox"/> Fictitious Name    |
| <input type="checkbox"/> Certified Copy      | <input type="checkbox"/> Call When Ready        | <input type="checkbox"/> CUS / G/S          |
| <input type="checkbox"/> Call When Ready     | <input type="checkbox"/> Call If Problem        | <input type="checkbox"/> After 4:30         |
| <input checked="" type="checkbox"/> Walk In  | <input type="checkbox"/> Will Wait              | <input checked="" type="checkbox"/> Pick Up |
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**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. Insurance Advisors of America, Inc.  
(Name of corporation: must include the word "INCORPORATED," "COMPANY," or "CORPORATION" or words or abbreviations of like import in language, as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. D.C.  
(State or country under the law of which it is incorporated)

3. December 23, 1994  
(Date of Incorporation)

4. Perpetual  
(Duration)

5. 75-2570423  
(Federal Employer Identification number, if applicable)

6. Upon Qualification  
(Date first transacted business in Florida. See sections 607.1501, 607.1502, and 817.155, F.S.)

7. 3909 Hulen, FORT WORTH, Texas 76107  
(Current mailing address)

8. See attached purpose clause  
(Brief description of the nature of the business in which it is engaged in the state of Florida)

9. Names and street addresses of officers and or directors:

**A. Directors:**

Chairman: ROBERT H. MERRILL

Address: 3909 Hulen  
FORT WORTH, Texas 76107

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: See attached list of directors

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**II. Officers:**

President: See attached list of officers

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

(If needed, you may attach an addendum to the application listing additional officers and/or directors.)

**10. Name and Street address of Florida registered agent:**

Name: C T Corporation System

Office Address: c/o C T Corporation System, 1200 South Pine Island Road  
Plantation, Florida 33324

Zip Code

**11. 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: \_\_\_\_\_

C T Corporation System

M.S. Green  
(Officer)

Asst Secy  
(Typed Name and Title of Officer)

12. 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.

13. \_\_\_\_\_

(Signature of Chairman, Vice Chairman, or any officer listed in number 9 of the application)

14. Robert H. Merrill, President

(Name and capacity of person signing application)

**Appendix to Florida  
Application by Fgn. Corp. for Authorization to Transact Business in Florida**

**Purpose Clause of  
Insurance Advisors of America, Inc.**

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MARKETING LIFE AND HEALTH INSURANCE PRODUCTS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 JUN 17 PM 2:53

Appendix to Florida  
Application by Fgn. Corp. for Authorization to Transact Business in Florida

**Directors of  
Insurance Advisors of America, Inc.**

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1. ROBERT H. MERRILL  
3909 Hulen  
FORT WORTH, Texas 76107
2. DENNIS M. HENSEL  
3909 Hulen  
FORT WORTH, Texas 76107
3. FRANK D GUNN  
3909 Hulen  
FORT WORTH, Texas 76107
4. WILLIAM DOUG ABBOTT  
3909 Hulen  
FORT WORTH, Texas 76107

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 JAN 17 PM 2:53

Appendix to Florida  
Application by Fgn. Corp. for Authorization to Transact Business in Florida

**Officers of  
Insurance Advisors of America, Inc.**

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1. ROBERT H. MERRILL, PRESIDENT  
3909 Hulen  
FORT WORTH, Texas 76107
2. DENNIS M. HENSEL, SECRETARY & TREASURER  
3909 Hulen  
FORT WORTH, Texas 76107
3. FRANK D GUNN, SENIOR VICE PRESIDENT  
3909 Hulen  
FORT WORTH, Texas 76107
4. WILLIAM DOUG ABBOTT, SENIOR VICE PRESIDENT  
3909 Hulen  
FORT WORTH, Texas 76107
5. STEVEN LLOYD DAUGHENBAUGH, VICE PRESIDENT  
3909 Hulen  
FORT WORTH, Texas 76107

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 JUN 17 PM 2:54

GOVERNMENT OF THE DISTRICT OF COLUMBIA  
DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS  
BUSINESS REGULATION ADMINISTRATION



**C E R T I F I C A T E**

***THIS IS TO CERTIFY*** that there were received and accepted for record in the Department of Consumer and Regulatory Affairs, Corporations Division, on the ***23rd*** day of ***December***, ***1994***, Articles of Incorporation of:

***INSURANCE ADVISORS OF AMERICA, INC.***

***WE FURTHER CERTIFY*** that the above named corporation is in Good Standing and is duly incorporated and existing according to the records of the Corporations Division, having filed all annual reports as required by the District of Columbia Business Corporation Act.

***IN TESTIMONY WHEREOF I*** have hereunto set my hand and caused the seal of this office to be affixed this ***11th*** day of ***January*** ***1995***.

Hampton Cross  
Director

Katherine A. Williams  
Acting Administrator  
Business Regulation Administration

Patricia E. Grays  
Acting Superintendent of  
Corporations Division

Marion Barry, Jr.  
Mayor

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CORPORATIONS  
DIVISION  
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