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TRANSMITTAL LETTER

TO:	QUALIFICATION/TAX LIEN	SECTION
	DIVISION OF CORPORATIO)NS

500001544725 -07/25/95--01023--002 *****70.00 *****70.00

SUBJECT: Gulf States Agrisurance, Inc. (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", 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:

Lawrence J. Beckman (Name of Person) Smith Peterson Law Firm (Firm/Company) 35 Main Place, Suite 300 (Address) Council Bluffs, IA 51503 (City, State and Zip Code)

Should you need to call someone concerning this matter, please call:

at (712) 328 - 1833 <u>Lawrence J. Beckman</u> Area Code & Daytime Telephone Number (Name of Person)

COURIER ADDRESS:

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Sec. **Division of Corporations** P. O. Box 6327 Tallahassee, FL 32314

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:

Gulf States Agris (Name of corporation: must abbreviations of like import or partnership if not so cont	urance, Inc. include the word 'n In language as will ained in the name a	NCORPORATE clearly indicate at present.)	D', 'COMPAI that it is a co	NY","CORPOR rporntion insta	MIONT or v.or. ad of a natural	ds or person
2. <u>Nebraska</u> (State or country under the I	nwof which it is inc	3, orporated)	(FEI num	per, if applicabl	e)	 -
4. June 22, 1995 (Date of Incorporation	5.	Perpetua (Duration	nî. Year corp. V	vill cease to ex	st or "perpetu:	al?
6. August 1, 1995 (Date first transacted busine	ss in Florida, (See no	ctions 807.1501, 8	07,1502, and B1	7.155, F.S.)		
7. 222 South 15th St						ים פי
	(Current mailing ad	dress)))
8. <u>Marketing of Insu</u> (Purposels) of corporation	rance nauthorized in hom	e state or coun	try to be carr	ied out in the s		
9. Name and street ad					: 17	13 m
Name:	Corporation S	ervice Comp	any			
Office Address:	1201 Hays Str	eet		 -		
	Tallahassee			, Florida , ³²	301	
	1.12			,	(Zip Code)	
IO. Registered agent's	acceptance:					
Having been named as recorporation at the place egistered agent and agree of all statutes relative to with and accept the obligation.	designated in t ee to act in this o the proper and o	his application application application as regineral formula in the complete per sition as regineral formula f	ion, I herel irther agree formance (by accept the to comply to find the duties	ne appointm with the pro	nent as visions

11. 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.

Names and addresses of officers and/or directors: (Street 12. address ONLY- P. O. Box NOT acceptable) DIRECTORS (Street address only- P. O . Box NOT acceptable) Α. Chairman: Richard C. Gibson 222 South 15th Street, Suite 600 North Address: Omoho, NE 68102 Vice Chairman: Kim Gibson Address: 222 South 15th Street, Suite 600 North Omaha, NE 68102 Director: John P. Nelson Address: 222 South 15th Street, Suite 600 North Omaha, NE 68102 Ken Coon Director: _____ 222 South 15th Street, Suite 600 North Address: ____ Omaha, NE 68102 **SEE ATTACHED B.OFFICERS(Street address only- P. O. Box NOT acceptable) President: ____ Kim Gibson Address: ____ 222 South 15th Street, Suite 600 North Omaha, NE 68102 Executive Vice President: Gene Grimsley Address: _____ 222 South 15th Street, Suite 600 North Omaha, NE 68102____ Pete Knolla Secretary: _____ 222 South 15th Street, Suite 600 North Address: _____ Omaha, NE 68102 Treasurer: Georgia Mace 222 South 15th Street, Suite 600 North Address: Omaha, NE 68102 **SEE ATTACHED NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the applic on) 14. Richard C. Gibson, Chairman
(Typed or printed name and capacity of person signing application)

ADDENDUM

Director

Gene Grimsley 222 South 15th Street Suite 600 N

Omaha, NE 68102

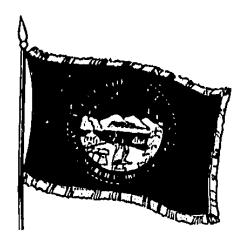
Vice President

Ted Waller Route 3, Box 739 Blakely, GA 31723

Vice President

Lewis Igou Route 3, Box 739 Blakely, GA 31723

STATE OF



NEBRASKA

United States of America, State of Nebraska

ss.

Department of State Lincoln, Nebraska

I, Scott Moore, Secretary of State of the State of Nebraska do hereby certify;

GULF STATES AGRISURANCE, INC.

with registered office located in OMAHA, Nebraska, filed Articles of Incorporation in this office on June 22, 1995.

I further certify that said corporation is in good standing as of this date.

25 AHII: I

In Testimony Whercof,



I have hercunto set my hand and affixed the Great Seal of the State of Nebraska on June 26 in the year of our Lord, one thousand nine hundred and ninety-five.

SECRETARY OF STATE