

Document Number Only

F95000005863

C T CORPORATION SYSTEM

Director's Name

660 East Jefferson Street

Address

Tallahassee, Florida 32301

City

State

Zip

Phone

904-222-1092

CORPORATION(S) NAME

000001642880  
-11/21/95--01059--018  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

W95-22979

Key Corp Insurance Agency Inc.

☒ Profit

☐ NonProfit

☐ Limited Liability Company

☒ Foreign

☐ Amendment

☐ Merger

☐ Dissolution/Withdrawal

☐ Mark

☐ Limited Partnership

☐ Restatement

☐ Annual Report

☐ Reservation

☐ Other

☐ Change of N.A.

☐ Certified Copy

☐ Photo Copies

☐ Fictitious Name

☐ CUS/ g/e

☐ Call When Ready

☒ Walk In

☐ Mail Out

☐ Call If Problem

☐ Will Wait

☐ After 4:30

☒ Pick Up

Name
Availability
Document
Examiner
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Verifier
Acknowledgment
W.P. Verifier

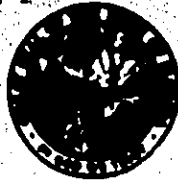
11/21/95

3:00

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CH2E031 (1-89)



**FLORIDA DEPARTMENT OF STATE**  
**Sandra B. Mortham**  
**Secretary of State**

**November 21, 1995**

**CT CORPORATION SYSTEM**

**SUBJECT: KEYCORP INSURANCE AGENCY INC.**  
**Ref. Number: W95000022979**

We have received your document for KEYCORP INSURANCE AGENCY INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

The certificate of existence that we require is issued by the Secretary of State, not the Insurance Department. The certificate should verify the exact name of the corporation and its corporate status in that state.

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6095.

Jennifer Sindt  
Document Examiner

Letter Number: 895A00051420

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TRANSACTION BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS  
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACTION BUSINESS IN THE  
STATE OF FLORIDA:

1. KeyCorp Insurance Agency Inc.

(Name of corporation: must include the word "INCORPORATED", "COMPANY", "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. New York

(State or country under the law of which it is incorporated)

3. 14-1745243

(FEI number, if applicable)

4. February 20, 1992

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. Upon Qualification

(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 617.156, F.S.))

7. 127 Public Square, Cleveland, Ohio 44114

(Current mailing address)

8. See attached purpose clause

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of  
Florida)

9. 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)

10. Registered agent 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 obligation of my position as registered agent.

C T Corporation System

(Registered agent's signature) (Officer)

Gil S. Apelis, Assistant Secretary

(Type Name and Title of Officer)

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.

12. Names and addresses of officers and/or directors:

A. DIRECTORS

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

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

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

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

Director: see attached list of directors

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

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

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

B. OFFICERS

President: see attached list of officers

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.

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

*William J. Blake*  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. William J. Blake, Secretary

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

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

**Purpose Clause of  
KeyCorp Insurance Agency Inc.**

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To be an authorized agent of an insurer and act as such in the solicitation of, negotiation for, or procurement or making of; insurance or annuity contracts.

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

**Directors of  
KeyCorp Insurance Agency Inc.**

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1. James S. Bingay  
127 Public Square  
Cleveland, Ohio 44114-1306
2. Gerald A. Fallon  
127 Public Square  
Cleveland, Ohio 44114-1306
3. Robert G. Jones  
127 Public Square  
Cleveland, Ohio 44114-1306
4. Daniel E. Klimas  
127 Public Square  
Cleveland, Ohio 44114-1306
5. John E. Kohl  
127 Public Square  
Cleveland, Ohio 44114-1306
6. Jack L. Kopnisky  
127 Public Square  
Cleveland, Ohio 44114-1306
7. W. Christopher Maxwell  
127 Public Square  
Cleveland, Ohio 44114-1306
8. Henry L. Meyer III  
127 Public Square  
Cleveland, Ohio 44114-1306

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

**Officers of  
KeyCorp Insurance Agency Inc.**

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1. Jack L. Kopinsky, President  
127 Public Square  
Cleveland, Ohio 44114-1306
2. Raymond F. Mack, Vice President  
127 Public Square  
Cleveland, Ohio 44114-1306
3. Karl F. Krebs, Treasurer  
127 Public Square  
Cleveland, Ohio 44114-1306
4. William J. Blake, Secretary  
127 Public Square  
Cleveland, Ohio 44114-1306
5. Steven N. Bulloch, Assistant Secretary  
127 Public Square  
Cleveland, Ohio 44114-1306
6. Eve C. Brunswick, Assistant Secretary  
127 Public Square  
Cleveland, Ohio 44114-1306



**State of New York  
Department of State**

**ss:**

I hereby certify, that the certificate of incorporation of KEYCORP INSURANCE AGENCY INC. was filed on 02/20/1992, with perpetual duration, and that I have made a diligent examination of the index of corporation papers filed in this Department for a certificate, order, or record of a dissolution, and upon such examination, I find no such certificate, order or record, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

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Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 29th day of November  
one thousand nine hundred and  
ninety-five.



*Elizabeth F. Trenchard*

192511300237

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 DEC -1 PM 4:19