

F96000000902

COMPANION SYSTEM  
Registration Name  
660 East Jefferson Street  
Address  
Tallahassee, Florida 32301  
City State Zip Phone  
904-222-1092  
COMPANION(S) NAME

400001721584  
-02/22/96--01060--013  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Autosurance of America, Inc.

- SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
FILED  
RECEIVED  
FEB 22 PM 12:57  
MAR 11 1996  
TALLAHASSEE, FLORIDA
- ☒ Profit  
☐ NonProfit  
☐ Limited Liability Company  
☒ Foreign  
☐ Amendment  
☐ Dissolution/Withdrawal  
☐ Annual Report  
☐ Resurrection  
☐ Photo Copies  
☐ Call if Problem  
☐ Will Wait  
☐ Merger  
☐ Mark  
☐ Other  
☐ Change of N.A.  
☐ Fictitious Name  
☐ GUS/ G/B  
☐ After 4:30  
☒ Pick Up  
☐ Call When Ready  
☒ Walk In  
☐ Mail Out

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

2/22/96

PLEASE RETURN EXTRA COPY(S)  
FILE SIGNED

CH2E031 (1-89)

**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. AutoSurance of America, 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. Tennessee  
(State or country under the law of which it is incorporated)
3. applied  
(FEI number, if applicable)
4. September 22, 1995  
(Date of Incorporation)
5. Perpetual  
(Duration: Year corp. will cease to exist or "perpetual")
6. 5/1/96  
(Date first transacted business in Florida. (See sections 607.1501, 607.1502 and 817.156, F.S.))
7. 825 Crossover Lane, Ste. 112  
Memphis, TN 38117  
(Current mailing address)
8. Issuance of automobile insurance policies  
(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 obligations of my position as registered agent.*

C T CORPORATION SYSTEM

  
(Registered agent's signature) (Officer)

John F. Linnihan-Assst. Vice President  
(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: Charles H. Gray, III

Address: 825 Crossover Lane, Ste. 112

Memphis, TN 38117

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

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

Director: Elena Barham

Address: 825 Crossover Lane, Ste. 112

Memphis, TN 38117

Director: Philip R. Zanone

Address: 825 Crossover Lane, Ste. 112

Memphis, TN 38117

**B. OFFICERS**

President: Charles H. Gray, III

Address: 825 Crossover Lane, Ste. 112

Memphis, TN 38117

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

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

Secretary: Elena Barham

Address: 825 Crossover Lane, Ste. 112

Memphis, TN 38117

Treasurer: Elena Barham

Address: 825 Crossover Lane, Ste. 112

Memphis, TN 38117

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.

Elena Barham

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14.

Elena Barham - Secretary

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
96 FEB 22 PM 12:57

**Secretary of State  
Corporations Section**

James K. Polk Building, Suite 1800  
Nashville, Tennessee 37243-0306

ISSUANCE DATE: 01/16/96  
REQUEST NUMBER: 96016019  
TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 09/22/1995  
STATUS: ACTIVE  
CORPORATE EXPIRATION DATE: PERPETUAL  
CONTROL NUMBER: 0300669  
JURISDICTION: TENNESSEE

TO:  
BAKER DONELSON BEARMAN ETC  
511 UNION STREET

NASHVILLE, TN 37219

REQUESTED BY:  
BAKER DONELSON BEARMAN ETC  
511 UNION STREET

NASHVILLE, TN 37219

**CERTIFICATE OF EXISTENCE**

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT  
-----  
"AUTOSURANCE OF AMERICA, INC."

-----  
IS A CORPORATION DULY INCORPORATED UNDER THE LAW OF THIS STATE WITH DATE OF  
INCORPORATION AND DURATION AS GIVEN ABOVE;  
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE  
EXISTENCE OF THE CORPORATION HAVE BEEN PAID;  
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND  
THAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATE AFFAIRS  
96 FEB 22 PM 12:57

-----  
FOR: REQUEST FOR CERTIFICATE

ON DATE: 01/16/96

FROM:  
BAKER DONELSON BEARMAN ETC (NASHVILLE)  
511 UNION ST  
SUITE 1700  
NASHVILLE, TN 37219-0000

RECEIVED: FEES \$80.00 \$80.00  
TOTAL PAYMENT RECEIVED: \$160.00

RECEIPT NUMBER: 00001894635  
ACCOUNT NUMBER: 00208389



*Riley C Darnell*

RILEY C. DARNELL  
SECRETARY OF STATE