

**INTERSTATE INSURANCE SERVICES GROUP, INC.**

**VIA U.S. PRIORITY MAIL**

April 1, 1996

Florida Department of State  
Division of Corporations  
Qualification/Registration Section  
Post Office Box 6327  
Tallahassee, Florida 32314

7100001787937  
-04/03/96--01042--020  
\*\*\*122.50 \*\*\*122.50

W96-7562

Re: **Interstate Insurance Administrators, Inc.**

Dear Sir or Madame:

Please find enclosed an original and a copy of the Application by Foreign Corporation for Authorization to Transact Business in Florida for **Interstate Insurance Administrators, Inc.**, and our check in the amount of \$122.50. We would request that you file this Application with the Florida Department of State at your earliest opportunity and return a file stamped copy of the Application and the Certificate of Authority to me at: Post Office Box 2368, Lake Wales, Florida 33859-2368.

Should you have any questions with regard to the filing of this Application, please do not hesitate to contact me. With kind regards, I am,

Sincerely,

*Luci Warren*

Luci Warren,  
Legal Department

lw  
Enclosures

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
96 APR 16 AM 8:36

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**TRANSMITTAL LETTER**

**TO: QUALIFICATION/REGISTRATION SECTION  
DIVISION OF CORPORATIONS**

**SUBJECT:** Interstate Insurance Administrators, Inc.  
(NAME OF CORPORATION)

Dear Sir or Madam:

The enclosed **APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**, certificate of existence, and check are being submitted to qualify the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Denna Smith  
(Name of Person)  
Interstate Insurance Services Group  
(Firm/Company)  
P O Box 2368  
(Address)  
Lake Wales, FL 33859-2368  
(City, State and Zip Code)

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Should you need to call someone concerning this matter, please call  
Denna Smith at (941) 676-1681.  
(Name of Person) Area Code & Telephone Number

**COURIER ADDRESS:**

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

**MAILING ADDRESS:**

Qualification/Registration Sec.  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

April 9, 1996

INTERSTATE INSURANCE SERVICES GROUP, INC.  
% LUCI WARREN  
250 EAST PARK AVE.  
LAKE WALES, FL 33853

SUBJECT: INTERSTATE INSURANCE ADMINISTRATORS, INC.  
Ref. Number: W96000007568

We have received your document for INTERSTATE INSURANCE ADMINISTRATORS, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 487-6097.

Michael Mays  
Document Specialist

Letter Number: 696A00016101

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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. Interstate Insurance Administrators, 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. Delaware  
(State or country under the law of which it is incorporated)
3. 3-12-96 4. Perpetual  
(Date of Incorporation) (Duration-Year Corp. will cease to exist or "perpetual")
5. Pending  
(Federal Employer Identification number, if applicable)
6. April 15, 1996  
(Date first transacted business in Florida. See sections 607.1501, 607.1502, and 817.155, F.S.)
7. Post Office Box 1319, Lake Wales, FL 33859-1319  
(Current mailing address)

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

Name: Bruce J. Gilbert  
Office Address: 250 East Park Avenue  
Lake Wales, Florida 33853  
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.

Registered agent's signature: \_\_\_\_\_

Bruce J. Gilbert

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.

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11. Names and addresses of officers and/or directors.

**A. Directors:**

Chairman: Allan F. Brooks

Address: 250 E. Park Avenue

Lake Wales, FL 33853

Vice Chairman: Bruce L. Gilbert

Address: 250 E. Park Avenue

Lake Wales, FL 33853

Director: Terry R. Borglund

Address: 244 E. Park Avenue

Lake Wales, FL 33853

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

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

**B. Officers:**

President: Allan F. Brooks

Address: 250 E. Park Avenue

Lake Wales, FL 33853

Vice President: Bruce L. Gilbert

Address: 250 E. Park Avenue

Lake Wales, FL 33853

Secretary: Deana M. Smith

Address: 244 E. Park Avenue

Lake Wales, FL 33853

Treasurer: Terry R. Borglund

Address: 244 E. Park Avenue

Lake Wales, FL 33853

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

12. 

(Signature of Chairman, Vice Chairman, or any officer listed in number 11 of the application)

13. Allan F. Brooks, President

(Type or print name and capacity of person signing application)

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DIVISION OF CORPORATIONS

*State of Delaware*  
*Office of the Secretary of State*


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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "INTERSTATE INSURANCE ADMINISTRATORS, INC." 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 NINETEENTH DAY OF MARCH, A.D. 1996.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
96 APR 16 AM 8:36



  
Edward J. Freel, Secretary of State

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AUTHENTICATION: 7872508

DATE: 03-19-96

INTERSTATE INSURANCE SERVICES GROUP, INC.

F 96 000001873

January 23, 1997

Florida Department of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

Re: Interstate Insurance Administrators, Inc.

400002069624--7  
-01/28/97--01036--006  
\*\*\*\*87.50 \*\*\*\*87.50

Dear Sir or Madame:

Enclosed please find an originally executed Articles of Dissolution on behalf of Interstate Insurance Administrators, Inc. Also included is our check totally \$87.50 - \$35.00 to serve as the filing fee and \$52.50 for a certified copy. Please file accordingly and mail our certified copy to the address below:

Interstate Insurance Administrators, Inc.  
Post Office Box 2368  
Lake Wales, Florida 33859-2368

Should you have any questions or require further information, do not hesitate to contact me. With kind regards, I am,

Sincerely,

*Luci Warren*  
Luci Warren,  
Legal Department

lw  
Enclosures



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

January 30, 1997

**LUCI WARREN, LEGAL DEPARTMENT  
INTERSTATE INSURANCE ADMINISTRATORS, INC  
PO BOX 2368  
LAKE WALES, FL 33859-2368**

**SUBJECT: INTERSTATE INSURANCE ADMINISTRATORS, INC.**  
**Ref. Number: F96000001873**

We have received your document for **INTERSTATE INSURANCE ADMINISTRATORS, INC.** and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

**THE FORM SUBMITTED IS FOR A FLORIDA DOMESTIC CORPORATION. THE ABOVE CORPORATION IS A DELAWARE CORPORATION QUALIFIED IN FLORIDA.**

A foreign corporation authorized to transact business or conduct its affairs in Florida may withdraw its authority by completing the enclosed withdrawal application and submitting the appropriate fee.

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) 487-6880.

Karen Gibson  
Corporate Specialist

Letter Number: 897A00004824



**INTERSTATE INSURANCE SERVICES GROUP, INC.**

February 5, 1997

Ms. Karen Gibson  
Florida Department of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

**Re: Interstate Insurance Administrators, Inc.  
Articles of Dissolution**


Dear Ms. Gibson:

Pursuant to your letter, dated January 30, 1997, enclosed please find two (2) originally executed Application by Foreign Corporation for Withdrawal of Authority to Transact Business or Conduct Affairs in Florida. Also included is a copy of you letter. Please file accordingly and mail our certified copy to the address below:

**Interstate Insurance Administrators, Inc.  
Luci Warren - Legal Department  
Post Office Box 2368  
Lake Wales, Florida 33859-2368**

Should you have any questions or require further information, do not hesitate to contact me. With kind regards, I am,

Sincerely,

  
Luci Warren,  
Legal Department

lw  
Enclosures

**APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL  
OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS  
IN FLORIDA**

Interstate Insurance Administrators, Inc.  
(Name of Corporation)

Delaware  
(Incorporated Under Laws Of)

This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address to which the Department of State may mail a copy of any process against this corporation that may be served on the Department.

Post Office Box 2368  
(Mailing Address)

Lake Wales, Florida 33859-2368  
(City/ State /Zip)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

 President  
Signature Title

Allan F. Brooks

2-05-97

Typed or printed name

Date