

F96000003893

Marvin E. Pritikin
(Requester's Name)
186 E Pearson St.
(Address)
Chicago, IL 60611
(City, State, Zip) (Phone #)

OFFICE USE ONLY

700001912267
-08/05/96--01023--009
*****78.75 *****78.75

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Illinois Founders Insurance Company
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☐ Walk in ☐ Pick up time _____

☐ Certified Copy

☐ Mail out ☐ Will wait ☐ Photocopy

☐ Certificate of Status

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DIVISION OF CORPORATIONS
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NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

**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. Illinois Founders Insurance Company
(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. Illinois 3. 36-2748795
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. August 25, 1972 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. N/A
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.)
7. 3425 North Cicero Avenue
Chicago, IL 60641
(Current mailing address)
8. Insurance Company
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

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9. Name and street address of Florida registered agent:

Name: Insurance Commissioner
Office Address: Capitol
Tallahassee, Florida, 32399-0300
(Zip Code)

10. 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.

Insurance Commissioner
(Registered agent's signature)

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: Marvin E. Pritikin
Address: 180 E. Pearson St.
Chicago, IL 60611
Vice Chairman: Michael R. Lutz
Address: 140 Sequoia Lane
Deerfield, IL 60015
Director: Marshall G. Lutz
Address: 3435 N. Cicero Ave.
Chicago, IL 60641
Director: _____
Address: _____

B. OFFICERS

President: Marvin E. Pritikin
Address: 180 E. Pearson St.
Chicago, IL 60611
Vice President: Gyna McElwee
Address: 708 Westchester Blvd.
Westchester, IL 60154
Secretary: Esther R. Berkery
Address: 3550 N. Lake Shore Dr., #1724
Chicago, IL 60657
Treasurer: Charles T. Koziol
Address: 32W769 Albert
E. Dundee, IL 60118

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

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Marvin E. Pritikin, Chairman & President
(Typed or printed name and capacity of person signing application)

**ADDENDUM
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION
TO TRANSACT BUSINESS IN FLORIDA**

12. (Continued) Names and address of officers and/or directors:

B. Officers

Vice President:	Robert A. McKenna
Address:	42 E. Harbor Dr. Lake Zurich, IL 60047

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STATE OF ILLINOIS

DEPARTMENT OF INSURANCE



WHEREAS, the Illinois Founders Insurance Company

located at Chicago in the State of Illinois was incorporated pursuant to the provisions of the "Illinois Insurance Code" applicable to said Company:

NOW, THEREFORE, I, the undersigned, Director of Insurance of the State of Illinois, do hereby certify that the said Company is authorized to transact its appropriate business as set forth under Clause(s) _____

(a), (b), (c), (d), (e), (f), (g), (h), (i), (j), (k) of Class 2

(a), (b), (c), (d), (e), (f), (g), (h) of Class 3

of Section 4 of the "Illinois Insurance Code" in this State, in accordance with the laws thereof.



IN TESTIMONY WHEREOF, I

hereto set my hand and cause to be affixed the Seal of my office. Done at the City of Springfield, this 10th day of

January, A.D., 1996.

Mark Boozell
Director of Insurance

Mark Boozell,

By: Kmk