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TO: QUALIFICATION/TAX LIEN SECTION
DIVISION OF CORPORATIONS

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

95 DEC -2 PM 12:21

FILED

8/23

SUBJECT: COMMONWEALTH DEALERS LIFE INSURANCE COMPANY
(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:

Roy E. Gill
(Name of Person)
Commonwealth Dealers Life Ins Co
(Firm/Company)
2641 E. Beekman Place
(Address)
Phoenix, AZ 85016
(City, State and Zip Code)

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*****78.75 *****78.75
W96-23005

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

Roy E. Gill at (602) 957-7752
(Name of Person) Area Code & Daytime Telephone Number

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



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

October 30, 1996

**ROY E GILL
COMMONWEALTH DEALERS LIFE INS CO
2641 E BEEKMAN PL
PHOENIX, AZ 85016**

SUBJECT: COMMONWEALTH DEALERS LIFE INSURANCE COMPANY
Ref. Number: W96000023005

We have received your document for **COMMONWEALTH DEALERS LIFE INSURANCE COMPANY** and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

Please be advised that a Po Box is not an acceptable address for the director.

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) 487-6094.

Doug Dickinson
Document Specialist

Letter Number: 196A00049880

**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. COMMONWEALTH DEALERS LIFE 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. VIRGINIA
(State or country under the law of which it is incorporated)
3. 54-1438901
(FEI number, if applicable)
4. December 16, 1987
(Date of incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. Not as yet
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 617.155, F.S.)
7. 3869 Plaza Drive
Fairfax, VA 22030
(Current mailing address)
8. To write direct and reinsure credit life insurance and credit accident and health insurance
(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: 1200 South Pine Island Road
Plantation, Florida, 33324
(Zip Code)

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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.

William C. Bradford, Jr.

(Registered agent's signature)

William C. Bradford, Jr., Vice Pres.

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: (Street address ONLY- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: Richard Barkhouser

Address: 3604 Riverside Dr., Danville, VA 24541

Vice Chairman: NA

Address:

Director: Robert Buddith

Address: 20920 Goshen Rd., Gaithersburg, MD 20879

Director: Homer E. Derrick

Address: 512 East Nelson St., Lexington, VA 24450

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: J. Bruce Furr

Address: 3869 Plaza Drive, Fairfax, VA 22030

Vice President: E. Kaye Biby

Address: 3869 Plaza Drive, Fairfax, VA 22030

Secretary: Richard Kern

Address: 2110 Valley Ave., Winchester, VA 22601

Treasurer: E. Kaye Biby

Address: 3869 Plaza Dr., Fairfax, VA 22030

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

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

14. E. Kaye Biby, Executive Vice President
(Typed or printed name and capacity of person signing application)

Commonwealth Dealers Life Insurance Company

3869 Plaza Drive, Fairfax, Virginia 22030

(703) 385-0121
Fax (703) 385-3420

CLAIMS ONLY
(703) 591-7804
(800) 229-7804

ADDENDUM ADDITIONAL DIRECTORS

Ervin Strosnider
5200 Oaklawn Blvd.
Hopewell, VA 23860

Joseph H. Nelson
PO BOX 4232
Rocky Mount, NC 27804

Don Lacefield
259 S. Churton St.
Hillsborough, NC 27278

Hubert Parks
6441 North Tryon St.
Charlotte, NC 28256

John W. Wyatt
3203 Bragg Blvd.
Fayetteville, NC 28303


E. Kaye Bibb, Executive Vice President

9-30-96
Date

ALFRED W. GROSS
COMMISSIONER OF INSURANCE

COMMONWEALTH OF VIRGINIA



P. O. BOX 1157
RICHMOND, VIRGINIA 23210
TELEPHONE: (804) 371-9741
TDD/VOICE: (804) 371-9206

STATE CORPORATION COMMISSION BUREAU OF INSURANCE

CERTIFICATE OF COMPLIANCE

I, Alfred W. Gross, Commissioner of Insurance in and for the Commonwealth of Virginia, do hereby certify that **COMMONWEALTH DEALERS LIFE INSURANCE COMPANY** is duly incorporated under the laws of Virginia to transact the business of insurance and, having complied with applicable insurance laws of this State, is duly licensed to transact the following classes of insurance:

**LIFE
ACCIDENT AND SICKNESS**

**CREDIT LIFE
CREDIT ACCIDENT AND SICKNESS**

According to the records of the Bureau of Insurance, said company is in compliance with applicable insurance laws of this State and is in good standing on the date of execution of this certificate.

Given under my hand and official seal in
Richmond, Virginia on October 22, 1996.

Alfred W. Gross
Commissioner of Insurance

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA