

F990000003804

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: The Monitor Company, Inc.
(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:

Detra Reed

(Name of Person)

Central Licensing Bureau

(Firm/Company)

1501 N. University, #550

(Address)

Little Rock, AR 72207

(City/State/Zip)

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FILED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

7/26

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-07/20/99-01060-003

*****78.75 *****78.75

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

Detra Reed

(Name of Person)

at (501) 664-8044

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☒ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**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. The Monitor Company, 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. 62-1710364

(FEI number, if applicable)

4. 8/4/92

(Date of incorporation)

5. Perpetual

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

6. when qualified

(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 2404 West End Ave - Suite 204

Nashville, TN 37203

(Current mailing address)

8. The corporation is presently in the business of insurance, functioning as an insurance agcy
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. **Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)**

Name: C T Corporation System

Office Address: 1200 So. Pine Island Road

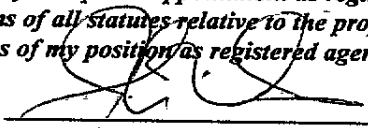
Plantation

, Florida, 33324

(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.


(Registered agent's signature)
J. E. Miles, Asst. Secy

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: Matthew P. Ashwood

Address: 6004 Deerbrook Drive

Nashville, TN 37221

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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

President: Stephen J. Rogers

Address: 601 Foxborough Square

Brentwood, TN 37027

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

14. Chairman / CEO
(Typed or printed name and capacity of person signing application)

**Secretary of State
Corporations Section**

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

ISSUANCE DATE: 06/15/1999
REQUEST NUMBER: 991661518B
TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 08/04/1992
STATUS: ACTIVE
CORPORATE EXPIRATION DATE: PERPETUAL
CONTROL NUMBER: 0255976
JURISDICTION: TENNESSEE

TO:
CENTRAL LICENSING BUREAU
1501 N UNIVERSITY
AT TERESA WILLIAMS
LITTLE ROCK, AR 72207

REQUESTED BY:
CENTRAL LICENSING BUREAU
1501 N UNIVERSITY
AT TERESA WILLIAMS
LITTLE ROCK, AR 72207

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT

"THE MONITOR COMPANY, 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 THE MOST RECENT CORPORATION ANNUAL REPORT REQUIRED HAS NOT BEEN FILED
WITH THIS OFFICE; AND
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND
THAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

FOR: REQUEST FOR CERTIFICATE

ON DATE: 06/15/99

FROM:
CENTRAL LICENSING BUREAU, INC.
SU-550 PROSPECT BLDG
1501 N. UNIVERSITY
LITTLE ROCK, AR 72207-0000

RECEIVED: FEES \$400.00 \$0.00

TOTAL PAYMENT RECEIVED: \$400.00

RECEIPT NUMBER: 00002509702
ACCOUNT NUMBER: 00139870



Riley C Darnell

RILEY C. DARNELL
SECRETARY OF STATE