

Document Number Only

F99000004210

C T CORPORATION SYSTEM

660 East Jefferson Street

Requestor's Name

Tallahassee, Florida 32301

Address

(850) 222-1092

City

State

Zip

Phone

CORPORATION(S) NAME

600002960666--8

-08/16/99--01089--006

*****70.00 *****70.00

NCRS Insurance Agency, Inc.

99 AUG 16 PM 2:45

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

- ☒ Profit
☐ NonProfit
☐ Limited Liability Company
☒ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Limited Liability Partnership
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☒ Walk In
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- ☐ Merger
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☐ Other
☐ Change of R.A.
☐ UCC-1 UCC-3
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AUG 16

Thanks, Melanie

31c
8/16/99

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99 AUG 16 PM 4:52
TALLAHASSEE, FLORIDA

**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. NCRS Insurance Agency, Inc.
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of 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. 41-1925330
(FEI number, if applicable)
4. December 3, 1998
(Date of Incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. Pending
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))
7. 7700 France Avenue S.
Minneapolis, MN 55435
(Current mailing address)
8. Offering, marketing and soliciting the sale of insurance products
(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:** (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: C T Corporation System

Office Address: 1200 South 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.

Michele K. Justensen, Asst. Secy.
(Registered agent's signature)
Michele K. Justensen, 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.

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DIVISION OF CORPORATIONS
AUG 16 1998
2:15 PM

12. Names and addresses of officers and/or directors: (Street addresses **ONLY** – P.O. Box **NOT** acceptable)

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

See attached

Chairman:

Address:

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

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

See attached

President:

Address :

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.



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

14.

John M. Benzian, Secretary

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

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**OFFICERS AND DIRECTORS
OF
NCRS Insurance Agency, Inc.**

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DIVISION
99 AUG 16 PM 2:45

OFFICERS

| <u>NAME</u> | <u>TITLE</u> | <u>ADDRESS</u> |
|------------------|--------------------------------------|---|
| Robert L. Briggs | President | 7700 France Avenue South Minneapolis, MN 55435 |
| Carlos Pearman | Vice President | 7700 France Avenue South Minneapolis, MN 55435 |
| Joseph L. Martin | Treasurer and Assistant Secretary | 7700 France Avenue South Minneapolis, MN 55435 |
| John M. Benzian | Secretary | 7700 France Avenue South Minneapolis, MN 55435 |
| Mary Morse | Assistant Secretary | 7700 France Avenue South Minneapolis, MN 55435 |

DIRECTORS

| <u>NAME</u> | <u>ADDRESS</u> |
|-------------------|---|
| James O. Cole | 110 SE 6 th Street Ft. Lauderdale, FL 33301 |
| Thomas W. Hawkins | 110 SE 6 th Street Ft. Lauderdale, FL 33301 |
| Joseph L. Martin | 7700 France Avenue South Minneapolis, MN 55435 |

TRANSMITTAL LETTER

TO: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: NCRS Insurance Agency, Inc.
(Name of corporation - must include suffix)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 AUG 16 PM 2:45

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:

Andrea Meister

(Name of Person)

CT Corporation System

(Firm/Company)

401 Second Avenue, Suite 454

(Address)

Minneapolis, MN 55401

(City/State/Zip)

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

Andrea Meister

(Name of Person)

at (800) 626-1773

(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 Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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 "NCRS INSURANCE AGENCY, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE ELEVENTH DAY OF AUGUST, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



Edward J. Freel

Edward J. Freel, Secretary of State

2973536 8300

991333179

AUTHENTICATION: 9915673

DATE: 08-11-99

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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