

M18000002844

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

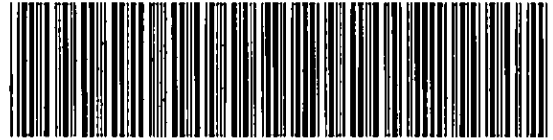
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2018 MAR 22 PM 1:03  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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MAR 23 2018  
J. HARRIS

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** AssuredPartners of Alabama, LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Jordan Lawrence

\_\_\_\_\_  
Name of Person

Herbert L. Jamison & Co., LLC

\_\_\_\_\_  
Firm/Company

20 Commerce Dr, Ste 200

\_\_\_\_\_  
Address

Cranford, NJ 07016

\_\_\_\_\_  
City/State and Zip Code

slawrence@jamisongroup.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
at (\_\_\_\_\_) \_\_\_\_\_  
Area Code Daytime Telephone Number

**MAILING ADDRESS:**

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

**STREET ADDRESS:**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- |                                              |                                                                                    |                                                                  |                                                                                         |
|----------------------------------------------|------------------------------------------------------------------------------------|------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$125.00 Filing Fee | <input checked="" type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$160.00 Filing Fee, Certificate<br>of Status & Certified Copy |
|----------------------------------------------|------------------------------------------------------------------------------------|------------------------------------------------------------------|-----------------------------------------------------------------------------------------|



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 2, 2018

JORDAN LAWRENCE  
HERBERT L JAMISON & CO, LLC  
20 COMMERCE DR, STE 200  
CRANFORD, NJ 07016

SUBJECT: ASSUREDPARTNERS OF ALABAMA, LLC  
Ref. Number: W18000020651

We have received your document for ASSUREDPARTNERS OF ALABAMA, LLC and your check(s) totaling \$130.00. 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 (850) 245-6051.

Jenna D Harris  
Regulatory Specialist II

Letter Number: 618A00004307

RECEIVED  
2018 MAR 22 AM 11:00  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

2018 MAR 22 PM 1:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS  
IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY  
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. AssuredPartners of Alabama, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. AL  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 30-1013272  
(FEI number, if applicable)

4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 5251 Hampstead High Street  
(Street Address of Principal Office)  
Unit 200  
Montgomery, AL 36116

6. 5251 Hampstead High Street  
(Mailing Address)  
Unit 200  
Montgomery, AL 36116

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

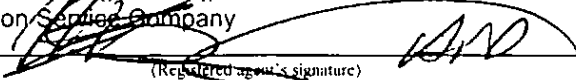
Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301  
(City) (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company 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.

Corporation Service Company  
By:   
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
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Please See Attached

(Use attachments if necessary)

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of an authorized person

Dean Curtis, EVP

Typed or printed name of signee

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SECRETARY OF STATE

EIN: 30-1013272

AssuredPartners of Alabama, LLC Officers & Directors

Name	Title	Business Address
William W. Henderson	Manager	200 Colonial Center Parkway Suite 150 Lake Mary, FL 32746
Thomas E. Riley	Manager	200 Colonial Center Parkway Suite 150 Lake Mary, FL 32746
Paul Vredenburgh	Manager	200 Colonial Center Parkway Suite 150 Lake Mary, FL 32746
Eric Anderson	EVP	2305 River Rd. Louisville, KY 40206
Sean J. Curtis	EVP	200 Colonial Center Parkway Suite 150 Lake Mary, FL 32746
Stanley K. Kinnett, II	EVP, Secretary	200 Colonial Center Parkway Suite 150 Lake Mary, FL 32746
Walter Smith	Asst Sec	200 Colonial Center Parkway Suite 150 Lake Mary, FL 32746
Louis M Berman	President	2305 River Rd. Louisville, KY 40206
William M Pierce	VP	5251 Hampstead High St #200 Montgomery, AL 36116
Time Tatara	VP	3860 Faber Pl Ste 400 North Charleston, SC 29405
Elley Hagan	VP	2305 River Rd. Louisville, KY 40206

SECRETARY OF STATE  
TALLAHASSEE FLORIDA  
2018 MAR 22 PM 1:03  
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John H. Merrill  
Secretary of State

P.O. Box 5616  
Montgomery, AL 36103-5616

# STATE OF ALABAMA

**I, John H. Merrill, Secretary of State of Alabama, having custody of the  
Great and Principal Seal of said State, do hereby certify that**

the entity records on file in this office disclose that AssuredPartners of Alabama, LLC was formed in Montgomery County, Alabama on December 7, 2017. The Alabama Entity Identification number for this entity is 409-681. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20180206000004134

**In Testimony Whereof, I have hereunto set my  
hand and affixed the Great Seal of the State, at the  
Capitol, in the city of Montgomery, on this day.**

02/06/2018

Date

A handwritten signature in cursive script, reading 'J. H. Merrill'.

John H. Merrill

Secretary of State