# M9700000 623 H.I.I.P.I. Group Protection ILED DIVISION OF CORPORATION

97 SEP 22 AM 9: 50

July 31, 1997

Florida Department of State Sandra B. Mortham, Secty. of State Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Re: HIIPI Group Protection LLC

Enclosed, please find all the necessary signed and completed forms to apply for an insurance license for HIIPI Group Protection LLC. Also, enclosed is a check in the amount of \$293.75 to cover the fees for this license.

Thank you for your assistance in the handling of this request.

Yours very truly,

Alice G. Keith

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v. P. Verifyer

Name
Availability

Document
Examiner

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Voice ar
Verifyer

KWM

**KWM** 

maked cusp for

2307 Commonwealth Drive Charlottesville, VA 22901 Phone (888) 544-2009 Fax (804) 978-4502

Alliliated with Health Industry Insurance Professionals, Inc. and National Group Protection, Inc.

9-22-



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

97 SEP 22 AM 9: 50

September 2, 1997

HIIPI GROUP PROTECTION ATTN: ALICE G. KEITH 2307 COMMONWEALTH DR. CHARLOTTESVILLE, VA 22901

SUBJECT: HIIPI GROUP PROTECTION LLC

Ref. Number: W97000018149

We have received your document for HIIPI GROUP PROTECTION LLC and your check(s) totaling \$293.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

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) 487-6967.

Kenny Manning Corporate Specialist

Letter Number: 497A00043791



FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

97 SEP 22 AM 9: 50

#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

August 6, 1997

HIIPI GROUP PROTECTION ATTN: ALICE G. KEITH 2307 COMMONWEALTH DR. CHARLOTTESVILLE, VA 22901

SUBJECT: HIIPI GROUP PROTECTION LLC

Ref. Number: W97000018149

We have received your document for HIIPI GROUP PROTECTION LLC and your check(s) totaling \$293.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

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

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 487-6967.

Kenny Manning Corporate Specialist

Letter Number: 397A00040038

8/26/97

PLEASE SEE ATTACHED.

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

VIRGINIA	_	54-1847043	
TRGINIA iction under the law of which foreign limiting is organized)	3	(FEI number, if a	pplicable)
pril 15, 1997 (Date of Organization)	5. <u>(</u> I	DECEMBER 31, 2047 Duration: Year limited liability dist or "perpetual")	company will ease to
September 1997 (Date first transacted business in			
2307 COMMONWEALTH DRIVE			
CHARLOTTESVILLE, VA 22901	reet address of prin	cinal office)	·
ame, title, and business address of e	ach managing m	ember[MGRM] or manag	er[MGR]who
name, title, and business address of e manage the foreign limited liability of NAME & ADDRESS:	ompany in Flori	da: (attach additional page	e if necessary)
nanage the foreign limited liability of NAME & ADDRESS:	ompany in Flori TITLE:	da: (attach additional page	e if necessary) TITLE:
nanage the foreign limited liability c	ompany in Flori TITLE:	NAME & ADDRESS:  Robert Snyder, II  Henry Ward Jounson,	if necessary)  TITLE:  - MGR  Princ. & Sr. V
NAME & ADDRESS:  National Group Protection	ompany in Flori TITLE: S <u>ecty</u> /Treas.	NAME & ADDRESS:  Robert Snyder, II	TITLE:  - MGR  Princ. & Sr. V
NAME & ADDRESS:  National Group Protection by: Sandra C. Palumbo  2307 Commonwealth Drive	ompany in Flori TITLE: S <u>ecty</u> /Treas.	NAME & ADDRESS:  Robert Snyder, II  Henry Ward Jounson, DBA Health Industry 300 S. Wacker Dr.,	TITLE:  - MGR  Princ. & Sr. V
NAME & ADDRESS:  National Group Protection by: Sandra C. Palumbo  2307 Commonwealth Drive	ompany in Flori TITLE: S <u>ecty</u> /Treas.	NAME & ADDRESS:  Robert Snyder, II  Henry Ward Jounson, DBA Health Industry 300 S. Wacker Dr.,	TITLE:  - MGR  Princ. & Sr. V
NAME & ADDRESS:  National Group Protection by: Sandra C. Palumbo  2307 Commonwealth Drive	ompany in Flori TITLE: S <u>ecty</u> /Treas.	NAME & ADDRESS:  Robert Snyder, II  Henry Ward Jounson, DBA Health Industry 300 S. Wacker Dr.,	TITLE:  - MGR  Princ. & Sr. V Insurance Prof

#### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of	of the Limited Liability Company is:			
HIIPI GROUP PROTECTION LLC				
2. The name a	and address of the registered agent and office are:			
	BRADLEY R. VAN HORN, ATTORNEY AT LAW	MICHAEL A. ABEL		
	(Name) McGUIRE-WOODS-BATTLE-&-BOOTHE-LLP-	McGUIRE WOODS & BATTLE Barnett Center, Suite 3550		
	ONE JAMES GENTER, 901 EAST GARY ST.	50 N. Laura St.		
	(P.O. Box or Mail Drop Box NOT ACCEP	TARLE) Jacksonville, FL 32202		
	RIGHMOND, VA 23219-4030-			
	(City/State/7in)			

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Signature) July 24 199

Filing Fee: \$ 35 for Designation of Registered Agent

### AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of a member of HIPL GROUP	PROTECTION_LL
deposes and says:	
1) the above named limited liability company has at least two members	
2) the total amount of cash contributed by the member(s) is	<u>\$ 15,000</u>
3) if any, the agreed value of property other than cash contributed by member(s) is A description of the property is attached and made a part hereto.	\$N/A
4) the amount of cash or property anticipated to be contributed by member(s) is This total includes amounts from 2 and 3 above.	\$
5) the total amount of cash or property anticipated to be contributed by member(s) is	\$_25,000
Signature of a member or authorized representative of a member (In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	er.

Filing Fee: \$250.00 for Application and Affidavit

SECRETARY OF STATE NS
DIVISION OF CORPORATIONS
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#### State Corporation Commission

I Certify the Following from the Records of the Commission:

a Virginia Limited Liability Company certificate was filed in this office on April 23, 1997 by HIIPI Group Protection, LLC.

a certificate of cancellation has not been filed in this office by HIIPI Group Protection, LLC.

Nothing more is hereby certified.

SECRETARY OF STATIONS SIVISION OF 22 AM 9:51



Signed and Sealed at Richmond on this Bate: September 12, 1997

William J. Bridge
Milliam J. Bridge, Clerk of the Commission

CIS20448