

P11000013188

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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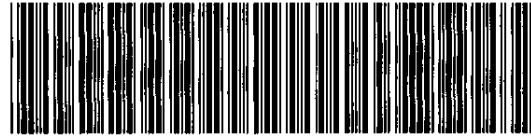
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 20 2011 FEB 08 2011

BANKERS EMPLOYER SERVICES, INC.

**P. O. BOX 15707, ST. PETERSBURG, FLORIDA 33733
11101 ROOSEVELT BLVD N, ST. PETERSBURG, FL 33716**

NANCY C. HAIRE
Assistant Secretary
Corporate Paralegal, FRP

February 3, 2011

FL Department of State
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

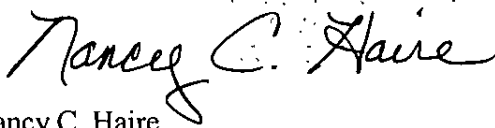
Re: FL profit corporation - Bankers Employer Services IV, Inc. - \$70.
Document # W11000000461 – Letter Number 110105103325-400189226964

FL profit corporation – Bankers Employer Services V, Inc. - \$70.
Document # W11000000478 – Letter Number 110105105532-300189234483

Dear Madam or Sir:

Attached please find the Articles of Incorporation, Letter of Name Approval, and our check in the total amount of \$140.00 to form two (2) new corporations referenced above.

Regards,



Nancy C. Haire

NH/s
Enclosures

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TALLAHASSEE, FLORIDA

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J. THOMAS CARDWELL
COMMISSIONER

xxx Street Address, City, State Zip
Phone (xxx) xxx-xxxx • Fax (xxx) xxx-xxxx
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January 10, 2011

Ms. Nancy C. Haire
11101 Roosevelt Blvd., N.
St. Petersburg, FL 33716

Dear Ms. Haire:

Re: Bankers Employer Services V, Inc.
Bankers Employer Services IV, Inc.

Thank you for your recent letter/fax requesting approval for use of the above-referenced names.

It is the opinion of this Office that the above-referenced corporate names are definitive enough to differentiate the business being conducted from that of a commercial bank or trust company. Therefore, the Office does not object to your use of the above-referenced names being registered to conduct business in the state of Florida. However, this does not give one the authority to act in any licensed capacity until all licensing requirements have been met within this state.

Sincerely,

Linda B. Charity
Director

LBC:bk

cc: Karon Beyer, Chief, Bureau of Commercial Recordings, Division of Corporations
Department of State

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TALLAHASSEE, FLORIDA

FINANCIAL SERVICES COMMISSION

RICK SCOTT
GOVERNOR

PAM BONDI
ATTORNEY
GENERAL

JEFF ATWATER
CHIEF FINANCIAL
OFFICER

ADAM PUTNAM
COMMISSIONER OF
AGRICULTURE

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Bankers Employer Services IV, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

11101 Roosevelt Blvd N.
St. Petersburg, FL 33716

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This Corporation may engage in any lawful activity or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 1,000 shares of common stock at (\$1.00) one dollar per share par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: David K. Meehan, Director

Address: 11101 Roosevelt Blvd N.
St. Petersburg, FL 33716

Name and Title: Jay K. Williams, President, & Director

Address: 11101 Roosevelt Blvd N.
St. Petersburg, FL 33716

Name and Title: Robert M. Menke, Director

Address: 11101 Roosevelt Blvd N.
St. Petersburg, FL 33716

Name and Title: Donald B. Roberts, Director

Address: 11101 Roosevelt Blvd N.
St. Petersburg, FL 33716

Name and Title: B. Bradford Martz, CFO & Director

Address: 11101 Roosevelt Blvd N.
St. Petersburg, FL 33716

Name and Title: Richard G. Torra, Secretary

Address: 11101 Roosevelt Blvd N.
St. Petersburg, FL 33716

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Nancy C. Haire

Address: 11101 Roosevelt Blvd N.
St. Petersburg, FL 33716

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Nancy C. Haire

Address: 11101 Roosevelt Blvd N.
St. Petersburg, FL 33716

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Nancy C. Haire
Required Signature/Registered Agent

2-1-11

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.

Nancy C. Haire
Required Signature/Incorporator

2-1-11

Date

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA