

Filing and License Fee: \$310.00 minimum



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State  
Division of Business Services  
148 W. River Street  
Providence, Rhode Island 02904-2615

BUSINESS CORPORATION

APPLICATION FOR CERTIFICATE OF AUTHORITY

Pursuant to the provisions of Section 7-1.2-1405 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign corporation hereby applies for a Certificate of Authority to transact business in the State of Rhode Island, and for that purpose submits the following statement:

1. The name of the corporation is Plateau Insurance Company
2. It is incorporated under the laws of Tennessee
3. The name, if different, which it elects to use in Rhode Island is:  
(a) *If the name of the corporation in its jurisdiction of incorporation does not contain the word "corporation", "company", "incorporated", or "limited" or an abbreviation thereof, then list the name of the corporation with the addition of one of the above corporate endings for use in Rhode Island:*  
  
  
(b) *If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation will qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application:*

4. The date of its incorporation is 7/15/1983 and the period of its duration is perpetual
5. The address of its principal office is 2701 N. Main St., Crossville, TN 38557-7001
6. The address of its proposed registered office in Rhode Island is 222 Jefferson Blvd., Suite 200  
(Street Address, not P.O. Box)

Warwick, RI 02888 and the name of its proposed registered agent in Rhode Island at  
(City/Town) (Zip Code)  
that address is National Registered Agents, Inc.  
(Name of Agent)

7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:  
Administer credit life/credit disability insurance policies (collect premiums and adjust and pay claims) for one Rhode Island insurance company.
8. (a) The names and respective addresses of its directors (optional unless directors are required under the laws of the state or country of which it is incorporated).

Name

Address

Director Directors are the same as Officers listed on next page

Director \_\_\_\_\_

Director \_\_\_\_\_

Director \_\_\_\_\_

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By

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(b) The names and respective addresses of its principal officers (mandatory if directors are not required under the laws of the state or country of which it is incorporated).


	<u>Name</u>	<u>Address</u>
President	<u>William Dickson Williams</u>	<u>9000 Legends Lake Lane</u> <u>Knoxville, TN 37922</u>
Executive Vice President	<u>Thomas L. Williams</u>	<u>80 Sandpiper Loop</u> <u>Crossville, TN 38555</u>
Treasurer	<u>Michael Ramsey</u>	<u>162 Little John Loop</u> <u>Crossville, TN 38555</u>
Secretary	<u>Euretha J. Roberts</u>	<u>251 Joe Henley Road</u> <u>Baxter, TN 38544</u>
Sr.V.P.	<u>D. Michael Graham</u>	<u>39 Graham Circle</u> <u>Crossville, TN 38555</u>

9. The aggregate number of shares which it has authority to issue; itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value or Statement that Shares are without Par Value</u>
<u>10,000</u>	<u>Common</u>		<u>\$2,000</u>

10. (a) \$ 192,500 = An estimate of the value of all property to be owned by the corporation for the following year, wherever located. (Residential rental property)(Business office is leased by applicant)
- (b) \$ 0 = An estimate of the value of the corporation's property to be located within Rhode Island during the following year.
- (c) 0 % = An estimate, expressed as a percentage, of the proportion that the estimated value of the property of the corporation to be located within this state during the following year bears to the value of all property of the corporation to be owned during the following year, wherever located. {divide (b) by (a) and multiply by 100 to obtain the percentage}
11. (a) \$ 14,750,000 = An estimate of the gross amount of business to be transacted by the corporation during the following year.
- (b) \$ 1,000 = An estimate of the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year.
- (c) less than 1 % = An estimate, expressed as a percentage, of the proportion that the gross amount of business to be transacted by the corporation at or from places of business in this state during the following year bears to the gross amount thereof which will be transacted by the corporation during the following year. {divide (b) by (a) and multiply by 100 to obtain the percentage}
12. This application is accompanied by a certificate of Good Standing issued by the proper officer of the state or country under the laws of which it is incorporated.
13. This Application for Certificate of Authority shall be effective upon filing unless a specified date is provided which shall be no later than the 90th day after the date of this filing \_\_\_\_\_.

Under penalty of perjury, I declare and affirm that I have examined this Application for Certificate of Authority, including any accompanying attachments, and that all statements contained herein are true and correct.



Signature of Authorized Officer of the Corporation

Date: 9/27/2011

William Dickson Williams

Type or Print Name of Authorized Officer



**STATE OF TENNESSEE**  
**Tre Hargett, Secretary of State**  
Division of Business Services  
William R. Snodgrass Tower  
312 Rosa L. Parks AVE, 6th FL  
Nashville, TN 37243-1102

**Mary Frances Graham - Plateau Insurance Co**  
2701 North Main Street  
CROSSVILLE, TN 38557

September 26, 2011

**Request Type: Certificate of Existence/Authorization**  
Request #: 0047950

Issuance Date: 09/26/2011  
Copies Requested: 3

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**Document Receipt**

Receipt #: 545437	Filing Fee:	\$60.00
Payment-Check/MO - Mary Frances Graham - Plateau Insurance Co, CROSSVILLE, TN		\$60.00

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**Regarding: PLATEAU INSURANCE COMPANY**

Filing Type: Corporation For-Profit - Domestic

Formation/Qualification Date: 07/15/1983

Status: Active

Duration Term: Perpetual

Control #: 130754

Date Formed: 07/15/1983

Formation Locale: Cumberland County

Inactive Date:

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**CERTIFICATE OF EXISTENCE**

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

**PLATEAU INSURANCE COMPANY**

- \* is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;
- \* has paid all fees, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- \* has filed the most recent corporation annual report required with this office;
- \* has appointed a registered agent and registered office in this State;
- \* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

  
Tre Hargett  
Secretary of State

Processed By: Sheila Keeling



# State of Rhode Island and Providence Plantations

**A. Ralph Mollis**

*Secretary of State*

## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island  
and Providence Plantations, hereby certify that this document, duly  
executed in accordance with the provisions of Title 7 of the General Laws  
of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

*Secretary of State*

