

Filing Fee: \$150.00
License Fee: \$15.00 minimum (§7-1.1-124)

ID Number: 1228916



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

BUSINESS CORPORATION

APPLICATION FOR CERTIFICATE OF AUTHORITY
(To Be Filed In Duplicate Original)

Pursuant to the provisions of Section 7-1.1-103 of the General Laws, 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 S.F.C. Insurance Associates, Inc.

2. It is incorporated under the laws of Maryland

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:

NA

(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:

S.F.C. Insurance Agency

4. The date of its incorporation is 6/81 and the period of its duration is perpetual

5. The address of its principal office in the state or country under the laws of which it is incorporated is

Maryland

6. The address of its proposed registered office in Rhode Island is 170 Westminster Street, Suite 900

(Street Address, not P.O. Box)

Providence

(City/Town)

RI 02903

(Zip Code)

and the name of its proposed registered agent in Rhode Island at

that address is Corporation Service Company

(Name of Agent)

7. The specific purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:

Insurance Sales

8. The names and respective addresses of the directors and officers are:

	Name	Address
Director	<u>Edward N. Stinger</u>	<u>809 Katesford Rd Cockeysville MD 21031</u>
Director	<u>James A. Frangione</u>	<u>12324 Michelsford Rd Cockeysville MD 21031</u>
President	<u>Edward N. Stinger</u>	<u>Same</u>
Vice President	<u>James A. Frangione</u>	<u>Same</u>
Treasurer	<u>James A. Frangione</u>	<u>Same</u>
Secretary	<u>Edward N. Stinger</u>	<u>Same</u>

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By kmf
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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:

Number of Shares	Class	Series	Par Value or Statement that Shares are without Par Value
100,000	Common		.01 Share

10. The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value or Statement that Shares are without Par Value
5,000	Common		.04

11. (a) An estimate of the value of all property to be owned by the corporation for the following year, wherever located, is
\$2,250,000.

- (b) An estimate of the value of the corporation's property to be located within Rhode Island during the following year is
\$ 0.

- (c) 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, is 0 %. [divide (b) by (a) and multiply by 100 to obtain the percentage].

12. (a) An estimate of the gross amount of business to be transacted by the corporation during the following year is
\$2,500,000.

- (b) 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 is \$ 0.

- (c) 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 is 0 % [divide (b) by (a) and multiply by 100 to obtain the percentage].

13. This application is accompanied by certified copies of its articles of incorporation and all amendments thereto, duly authenticated by the secretary of state or other authorized officer of the jurisdiction of its incorporation.

Date: 2-6-02

S.F.C. Insurance Associates, Inc.
Print Exact Name of Corporation Making Application

By James Franzoni

☐ President or ☒ Vice President (check one)

By [Signature]

☒ Secretary or ☐ Assistant Secretary (check one)

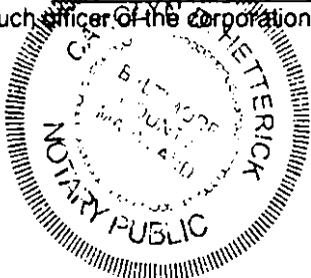
STATE OF Maryland
COUNTY OF Baltimore

In _____, on this 6th day of February, 2002, personally appeared before me James A. Franzoni, Edward Stringer who, being by me first duly sworn, declared that he/she is the Vice President Secretary of the corporation and that he/she signed the foregoing document as such officer of the corporation, and that the statements herein contained are true.

Carolyn A. Hetherick

Notary Public

My Commission Expires: 04/01/03



STATE OF MARYLAND

I hereby certify that this is a ⁸ ~~true and complete~~ copy of the ^{ARTICLES OF INCORPORATION} page document on file in this office. DATED: 12-4-01

STATE DEPARTMENT OF ASSESSMENTS AND TAXATION
& C. INSURANCE ASSOCIATES, INC.

BY: Ann Curtis, Custodian

This stamp replaces our previous certification system. Effective: 6/95

approved and received for record by the State Department of Assessments and Taxation
of Maryland July 2, 1981 at 1:00 o'clock P.M. as in conformity
with law and ordered recorded.

Recorded in Liber 2512 folio 2186, one of the Charter Records of the State
Department of Assessments and Taxation of Maryland.

Bonus tax paid \$ 20.00 Recording fee paid \$ 24.00 Special Fee paid \$ _____

To the clerk of the Circuit Court of Anne Arundel County

IT IS HEREBY CERTIFIED, that the within instrument, together with all indorsements thereon, has
been received, approved and recorded by the State Department of Assessments and Taxation of Maryland.

AS WITNESS my hand and seal of the said Department at Baltimore.



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