

B06000000207

(Requestor's Name)

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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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06 MAY 12 AM 11:18
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SECRETARY OF STATE
TALLAHASSEE FL
DIVISION OF CORPORATION

B06-207
a

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Oxford Insurance Services Limited - FEIN 20-2274771
(Name of Foreign Limited Partnership or Limited Liability Limited Partnership)

The enclosed application, certificate of status and fees are submitted to register a foreign limited partnership or limited liability limited partnership to transact business in Florida. Please return all correspondence concerning this matter to:

Becky Kessler

(Contact Person)

Oxford Insurance Services Limited

(Firm/Company)

820 Gessner, Suite 1000

(Address)

Houston, TX 77024

(City, State and Zip Code)

For further information concerning this matter, please call:

Becky Kessler

(Name of Contact Person)

at (713) 932-5342

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)	☐ \$1,008.75 Filing Fees and Certificate of Status	☐ \$1,052.50 Filing Fees and Certified Copy	☒ \$1,061.25 Filing Fee, Certified Copy, and Certificate of Status
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STREET ADDRESS:

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

MAILING ADDRESS:

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

06 MAY 12 AM 11:18
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TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 30, 2006

BECKY KESSLER
820 GESSNER, SUITE 1000
HOUSTON, TX 77024

SUBJECT: OXFORD INSURANCE SERVICES LIMITED
Ref. Number: W06000015343

We have received your document for OXFORD INSURANCE SERVICES LIMITED and your check(s) totaling \$1061.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability partnership must have an active registration/filing on file with this office before this filing will be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

A certificate of existence or a certificate of good standing, 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) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 006A00021720

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 3, 2006

BECKY KESSLER
820 GESSNER, SUITE 1000
HOUSTON, TX 77024

SUBJECT: OXFORD INSURANCE SERVICES LIMITED
Ref. Number: W06000015343

We have received your document for OXFORD INSURANCE SERVICES LIMITED and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, 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) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 206A0003142

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP
TO TRANSACT BUSINESS IN FLORIDA

1. Oxford Insurance Services Limited

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.
or LLLP.

(If name unavailable, name under which the limited partnership or limited liability limited partnership
proposes to register to transact business in Florida; must contain acceptable suffix.)

2. Texas

(State or Country of Formation)

3. 01/18/2005

(Date of Formation)

4. Corporation Service Company

(Name of Registered Agent for Service of Process)

5. 1201 Hays Street

(Florida street address for Registered Agent)

Tallahassee, Florida 32301

6. 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.

Cynthia L. Harris
Signature of Registered Agent

Cynthia L. Harris
as its agent

7. 820 Gessner, Suite 1000

(Principal office address)

Houston, TX 77024

8. If limited partnership is a limited liability limited partnership, check box ☐

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TALLAHASSEE, FLORIDA

9. 820 Gessner, Suite 1000

(Mailing address)

Houston, TX 77024

10. Name, principal office address, and mailing address of each general partner:

William F. Galtney, Jr.

(Name)

820 Gessner, Suite 1000

(Street Address)

Houston, TX 77024

(same as above)

(Mailing Address)

Oxford GP Services, LLC

(Name)

MO6-2481

820 Gessner, Suite 1000

(Street Address)

Houston, TX 77024

(same as above)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

11. Effective date, if other than the date of filing: _____.

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 22nd day of March, 20 06

Signature of a general partner:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Filing Fees:	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697



Roger Williams
Secretary of State

Office of the Secretary of State

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Limited Partnership for Oxford Insurance Services Limited (filing number: 800440686), a Domestic Limited Partnership (LP), was filed in this office on January 18, 2005.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on May 10, 2006.



A handwritten signature in black ink that reads "Roger Williams".

Roger Williams
Secretary of State