

foreign corp

F02000001427

TRANSMITTAL LETTER

RECEIVED  
DIVISION OF CORPORATIONS

02 MAR 20 AM 9:15

TO: Registration Section  
Division of Corporations

SUBJECT: PROFESSIONAL INDEMNITY AGENCY, INC.  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

<u>Debra Green</u>	<u>500004772545--7</u>
(Name of Person)	-01/14/02-01039-003
<u>HCC Service Company</u>	*****78.75 *****78.75
(Firm/Company)	
<u>13403 Northwest Freeway</u>	<u>602-1326</u>
(Address)	
<u>Houston, Texas 77040</u>	
(City/State and Zip code)	

*Handwritten signature/initials*

For further information concerning this matter, please call:

<u>Debra Green</u>	at ( <u>713</u> ) <u>690-7300, X 135</u>
(Name of Person)	(Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

*Handwritten circled number 7*

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee    ☒ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

F02-1427



**FLORIDA DEPARTMENT OF STATE**

**Katherine Harris**  
Secretary of State

January 16, 2002

**DEBRA GREEN**  
13403 NORTHWEST FREEWAY  
HOUSTON, TX 77040

**SUBJECT: PROFESSIONAL INDEMNITY AGENCY, INC.**  
Ref. Number: W02000001326

We have received your document for PROFESSIONAL INDEMNITY AGENCY, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

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) 245-6097.

Michael Mays  
Document Specialist

Letter Number: 402A00002254

# HCC SERVICE COMPANY



13403 Northwest Freeway, Houston, Texas 77040 Telephone: (713) 744-9695 Facsimile: (713) 744-9696

March 8, 2002

Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

Re: Application for Authorization to Transact Business in Florida

Dear Sir or Madam:

Enclosed please find a copy of documentation which I forwarded to you on January 8, 2002 relating to an Application for Professional Indemnity Agency, Inc. (the "Company") to do business in Florida. I understand that the filing was rejected. Please accept the enclosed copies as a resubmission. (I never received anything back from you.) Also enclosed is an original Certificate of Good Standing from New Jersey for the Company.

Please contact me if you have any questions, problems, or need anything else related to this filing request, at 713-690-7300, extension 135, or via e-mail at [dgreen@hcch.com](mailto:dgreen@hcch.com).  
Thank you.

Sincerely,

A handwritten signature in black ink, appearing to read "Debra M. Green". The signature is fluid and cursive, with a long horizontal stroke at the end.

Debra M. Green, CLA  
Corporate Paralegal

Enclosures

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. PROFESSIONAL INDEMNITY AGENCY, INC.  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. New Jersey 3. 13-2918810  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. November 17, 1977 5. perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. upon qualification  
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 345 Route 17 South, Upper Saddle River, NJ 07458  
(Principal office address)  
Same as above  
(Current mailing address)
8. Insurance agency/services  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. **Name and street address of Florida registered agent:** (P.O. Box or Mail Drop Box **NOT** acceptable)  
Name: Corporation Service Company  
Office Address: 1201 Hays Street  
Tallahassee, Florida 32301  
(City) (Zip code)

**10. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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.*

Corporation Service Company

Charan Bermudez, asst. secretary  
(Registered agent's signature)

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

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SECRET  
DIVISION OF CORPORATIONS

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Mark E. Rattner

Address: 345 Route 17 South, Upper Saddle River, NJ 07458

Director: Edward H. Ellis, Jr.  
~~Vice-Chairman:~~

Address: 13403 Northwest Freeway, Houston, Texas 77040

Director: Christopher L. Martin

Address: 13403 Northwest Freeway, Houston, Texas 77040

Director: John N. Molbeck, Jr.

Address: 13403 Northwest Freeway, Houston, Texas 77040

B. OFFICERS

President: Mark E. Rattner

Address: 345 Route 17 South, Upper Saddle River, NJ 07458

Vice President: Edward H. Ellis, Jr.

Address: 13403 Northwest Freeway, Houston, Texas 77040

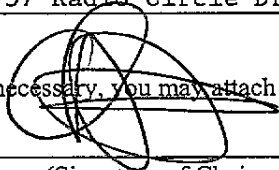
Secretary: Christopher L. Martin

Address: 13403 Northwest Freeway, Houston, Texas 77040

Treasurer: Gerald Axel

Address: 37 Radio Circle Drive, P.O. Box 5000, Mount Kisco, NY 10549

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.   
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Christopher L. Martin, Executive Vice President & Secretary

(Typed or printed name and capacity of person signing application)

STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING

PROFESSIONAL INDEMNITY AGENCY, INC.

*With the Previous or Alternate Name*

RATTNER UNDERWRITING AGENCY, INC. (Previous Name)

*I, the Treasurer of the State of New Jersey,  
do hereby certify that the above-named  
New Jersey Domestic Profit Corporation was  
registered by this office on November 17, 1977.*

*As of the date of this certificate, said business  
continues as an active business in good standing  
in the State of New Jersey, and its Annual Reports  
are current.*

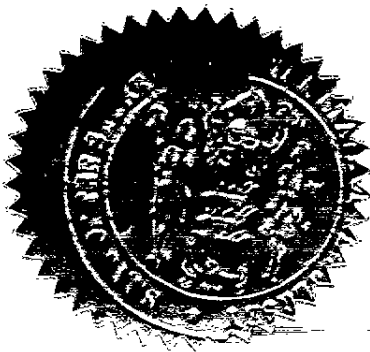
*I further certify that the registered agent and  
registered office are:*

Corporation Service Company  
830 Bear Tavern Rd  
West Trenton, NJ 08628

*Continued on next page . . .*

STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING

PROFESSIONAL INDEMNITY AGENCY, INC.



IN TESTIMONY WHEREOF, I have  
hereunto set my hand and  
affixed my Official Seal  
at Trenton, this  
28th day of February, 2002

A handwritten signature in cursive script, reading "John E. McCormac".

John E McCormac, CPA  
State Treasurer

02 MAR 20 AM 9:15

DIVISION OF REVENUE