

F05000004880

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECURITY STATE
TALLAHASSEE, FLORIDA

CT CORPORATION

August 19, 2005

Department of State, Florida
409 East Gaines Street
Tallahassee FL 32399

Re: Order #: 6381927 SO
Customer Reference 1: CNA
Customer Reference 2:

Dear Department of State, Florida:

Please obtain the following:

Marsh Private Client Life Insurance Services (CA)
Qualification
Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Ashley A Mitchell
Fulfillment Specialist
Ashley_Mitchell@cch-lis.com

1203 Governors Square Boulevard
Tallahassee, FL 32301-2960
Tel. 850 222 1092
Fax 850 222 7615

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05 AUG 19 PM 2:56
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FLORIDA
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
DATE
TALLAHASSEE, FLORIDA

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. MARSH PRIVATE CLIENT LIFE INSURANCE SERVICES Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. California

(State or country under the law of which it is incorporated)

3. 95-1965459

(FEI number, if applicable)

4. 12/18/1987

(Date of incorporation)

5. Perpetual

(Duration: Year corp will cease to exist or "perpetual")

6. 03/10/1993

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 20750 Ventura Blvd., Woodland Hills, CA 91364

(Principal office address)

121 River Street Hoboken, NJ 07030

(Current mailing address)

8. The sale of Life and Health Insurance and Variable Contracts as an Insurance agency.

(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 NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

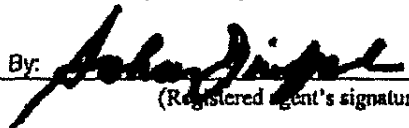
, Florida 33324

(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.

C T Corporation System

By: 

(Registered agent's signature)

Sohan Dindyal
Assistant Secretary

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.

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

A. DIRECTORS

Chairman: SEE ATTACHMENT

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: SEE ATTACHMENT

Address: _____

Vice President: _____

Address: _____

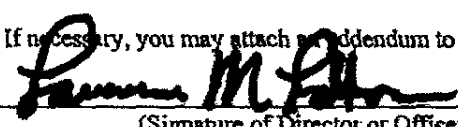
Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. 

(Signature of Director or Officer listed in number 12 of the application)

14. Lawrence M. Lehan, Asst. Secretary, June 1, 2005

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

Marsh Private Client Life Insurance Services

Appointed person	Appointed as	Business Address	Home address
RUBENSTEIN, Daniel E.	Director, CFO	1166 Ave. of the Americas New York, NY 10036	193 Dogwood Lane, Stamford, CT 06903
WOLFE, Barry L.	Director, CEO	22578 Flamingo Street Woodland Hills, CA 91364	22578 Flamingo Street, Woodland Hills, CA, 91364
GIGLIOTTI, Joseph P.	Vice President	1166 Ave. of the Americas New York, NY 10036	99 Jane Street, New York, NY 10014
STANICK, Keith	Vice President	121 River St. Hoboken, NJ 07030	101 Smith Lane, Centereach, NY 11720
O'BRIEN, Margaret M.	Secretary	1166 Ave. of the Americas New York, NY 10036	6 Roger Sherman Place Rye, New York, 10580
LEHAN, Lawrence M.	Assistant Secretary	1166 Ave. of the Americas New York, NY 10036	125 Holmes Ave. Darien, CT 06820
BARTLEY, Matthew B.	Treasurer	1166 Ave. of the Americas New York, NY 10036	41 Bisbee Lane, Bedford Hills, NY 10507

Created on 5/26/2005

State of California
Secretary of State

CERTIFICATE OF STATUS
DOMESTIC CORPORATION

I, **BRUCE McPHERSON**, Secretary of State of the State of California, hereby certify:

That on the **18TH** day of **DECEMBER, 1957**, **MARSH PRIVATE CLIENT LIFE INSURANCE SERVICES** became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That no record exists in this office of a certificate of dissolution of said corporation nor of a court order declaring dissolution thereof, nor of a merger, conversion or consolidation which terminated its existence; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.

IN WITNESS WHEREOF, I execute this
certificate and affix the Great Seal
of the State of California this day
of June 1, 2005.



BRUCE McPHERSON
Secretary of State