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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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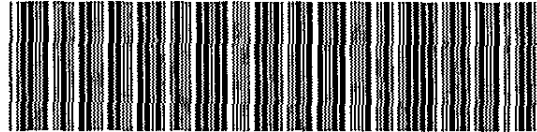
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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J. Shivers OCT 02 2006

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Employers Insurance Company of Nevada
(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:

Michael T. Stock

(Name of Person)

Employers Insurance Group

(Firm/Company)

500 N. Brand Blvd., Suite 800

(Address)

Glendale, CA 91203

(City/State and Zip code)

For further information concerning this matter, please call:

Michael T. Stock

(Name of Person)

at (818) 552-4811

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

New Filing 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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**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. **Employers Insurance Company of Nevada**

(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. **Nevada**

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

3. **88-0442429**

(FEI number, if applicable)

4. **12/01/1999**

(Date of incorporation)

5. **Perpetual**

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

6. **N/A**

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

7. **9790 Gateway Drive, Suite 100, Reno, Nevada 89521**

(Principal office address)

9790 Gateway Drive, Suite 100, Reno, Nevada 89521

(Current mailing address)

8. **Licensed to transact Workers' Compensation insurance business**

(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: **CT Corporation System**

Office Address: **1200 South Pine Island Road**

Plantation

(City)

, Florida

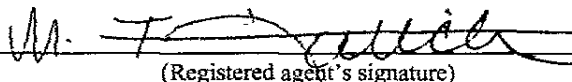
33324

(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.

M.T. FITZPATRICK
ASSISTANT 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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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: Robert J. Kolesar

Address: 3320 W. Sahara Avenue Ste 380
Las Vegas, Nevada 89102

Vice Chairman: N/A

Address: _____

Director: Please see attached list.

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Martin J. Welch

Address: 9790 Gateway Drive, Suite 100
Reno, NV 89521

Vice President: Cynthia M. Morrison

Address: 500 N. Brand Blvd., Suite 800
Glendale, CA 91203

Secretary: Lenard T. Ormsby

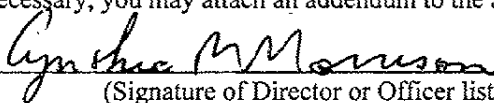
Address: 9790 Gateway Drive, Suite 100, Reno, Nevada 89521

Treasurer: William E. Yocke

Address: 9790 Gateway Drive, Suite 100, Reno, Nevada 89521

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. Cynthia M. Morrison, Vice President, Corporate Controller

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

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TALLAHASSEE, FLORIDA

Employers Insurance Company of Nevada

Directors

<u>Name</u>	<u>Business Address</u>
Robert John Kolesar Chairman of the Board	Lawyer, Partner in Kolesar & Leatham, Chtd. 3320 W. Sahara Avenue Ste 380, Las Vegas, Nevada 89102
Michael David Rumbolz Member of the Board	Managing Director, Acme Gaming, LLC 2300 Green Mountain Court, Las Vegas, Nevada 89135
Katherine Won Ong Member of the Board	CPA, Partner in Hobbs & Ong 3900 Paradise Road, Suite 152, Las Vegas, Nevada 89109
Rose Enid McKinney-James Member of the Board	Owner, Energy Works, Inc. 8912 Montego Bay Drive, Las Vegas, Nevada 89117
Ronald Francis Mosher Member of the Board	Retired 54 Coronado Pointe, Laguna Niguel, California 92677
John Peter Sande, III Member of the Board	Lawyer, Partner in Jones Vargas Law Firm 100 W. Liberty Street 12 th Floor, Reno, Nevada 89501
Richard Watson Blakey, M.D. Member of the Board	Partner in Reno Orthopaedic Clinic 555 N. Arlington Avenue, Reno, Nevada 89503
Douglas Dean Dirks Member of the Board	Chief Executive Officer Employers Insurance Company of Nevada 9790 Gateway Drive, Suite 100, Reno, NV 89521
Martin Jay Welch Member of the Board	President & Chief Operating Officer Employers Insurance Company of Nevada 790 Gateway Drive, Suite 100, Reno, NV 89521

Senior Management / Officers

<u>Name</u>	<u>Title</u>
Douglas Dean Dirks	Chief Executive Officer
Martin Jay Welch	President, Chief Operating Officer
Lenard Thomas Ormsby	Executive Vice President, General Counsel and Secretary
Ann Wilson Nelson	Executive Vice President, Corporate and Public Affairs
William Eric Yocke	Executive Vice President, Chief Financial Officer and Treasurer
John Paul Nelson	Senior Vice President, Chief Administrative Officer
Stephen Vincent Festa	Senior Vice President, Chief Claims Officer
Paul Ivan Ayoub	Senior Vice President, Chief Information Officer
Jeff Joseph Gans	Senior Vice President, Chief Underwriting Officer
George Francis Tway	President, Western Region
Cynthia Marie Morrison	Vice President, Corporate Controller

SECRETARY OF STATE

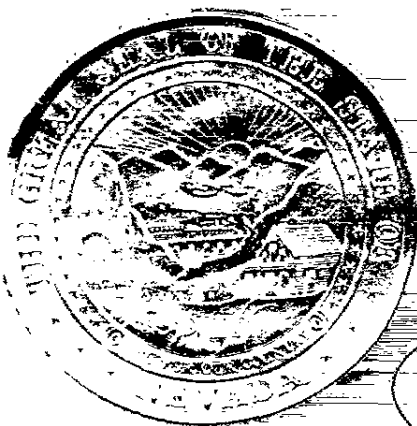


CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **EMPLOYERS INSURANCE COMPANY OF NEVADA**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since December 1, 1999, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on August 28, 2006.



Dean Heller

DEAN HELLER
Secretary of State

By

Acqueline Wille
Certification Clerk