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SECRETARY OF STATE
TALLAHASSEE, FI ORIGA

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: NorthStar Risk Managem	nent & Insurance Services, Inc.
	ation - must include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation f "Certificate of Existence," and check are submitted t transact business in Florida.	For Authorization to Transact Business in Florida," to register the above referenced foreign corporation to
Please return all correspondence concerning this mat	tter to the following:
George Dias	
(Name	e of Person)
NorthStar Risk Management & Insu	ırance Services, Inc.
	Company)
1777 Botelho Dr Ste 360	
·	ddress)
Walnut Creek, CA 94596	
(City/Sta	te and Zip code)
For further information concerning this matter, pleas	se call:
George Dias at (925	5) 975-5900 X 237
	ea 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 & \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy

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.	NorthStar Risk Management & Insu (Enter name of corporation; must include "INCORPORAT" Inc.," "Co.," "Corp." "Inc," "Co," or "Corp.")				
	(If name unavailable in Florida, enter alternate corporate na	атте	adopted for the purpose of transacting business in	Florida)	
2.	California	3.	68-0307094		
	(State or country under the law of which it is incorporated)		(FEI number, if applicable)		
4.	04/30/1993	5.	Perpetual		
٠.	(Date of incorporation)		(Duration: Year corp. will cease to exist or "per	petual")	
6.	Projected : November 1, 2007		•		
-	(Date first transacted busine	ss ii 17.15	n Florida, if prior to registration) 502, F.S., to determine penalty liability)		
7.	1777 Botelho Dr Ste 360 Walnut Cre	ek	i, CA 94596	•	
	(Principal office	add	1035)		
	1777 Botelho Dr Ste 360 Walnut Cre	ek	k, CA 94596		
	(Current mailing	add	ress)		
	Incurance Agangu				
8.	Insurance Agency (Purpose(s) of corporation authorized in home state of		suptry to be serviced out in state of Elevida		
	• • • • • • • • • • • • • • • • • • • •			_	
9.	Name and street address of Florida registered agent:			2013 SEC	
	Name: Corp Direct Age	<u>1+</u>	s. Inc.	A SE	Mainer E
0	ffice Address: 515 East Park	A	venue	2007 SEP 17 SECRETARY ALL AHASSET	FIGURE.
	Tallahastee (City)	_	, Florida 3230 (Zip code)	PH 4: 16	E L
	O. Registered agent's acceptance: aving been named as registered agent and to accept so	ervi	JF T	O i	2
fu	esignated in this application, I hereby accept the appo arther agree to comply with the provisions of all statut and I am familiar with and accept the abligations of my	es r	elative to the proper and complete performa		
	Registered agent's signatu	5	· ga ·		

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: Charles W. Bates Address: 1777 Botelho Dr Ste 360 Walnut Creek, CA 94596 Vice Chairman: `_____ Address: Director: David S. Costello Address: 1777 Botelho Dr Ste 360 Walnut Creek, CA 94596 **B. OFFICERS** President: David S. Costello Address: 1777 Botelho Dr Ste 360 Walnut Creek, CA 94596 Vice President: _____ Secretary: Charles W. Bates Address: 1777 Botelho Dr Ste 360 Walnut Creek, CA 94596 Treasurer: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) 14. Charles W. Bates, CEO (Typed or printed name and capacity of person signing application)

State of California Secretary of State

CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

That on the 30th day of April, 1993, NORTHSTAR RISK MANAGEMENT & INSURANCE SERVICES INCORPORATED became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; 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 August 13, 2007.



Jena Bowen

DEBRA BOWEN Secretary of State