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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

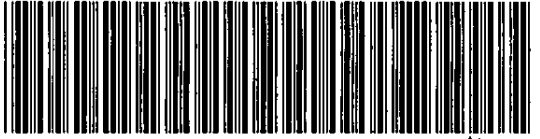
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/07/07--01020--007 **78.75

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
1/22

1007-59509

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Citadel Insurance Co., Risk Retention Group

(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:

Heather Ross

(Name of Person)

c/o Risk Services

(Firm/Company)

2233 Wisconsin Avenue, N.W., Suite 310

(Address)

Washington, DC 20007

(City/State and Zip code)

For further information concerning this matter, please call:

Heather Ross

(Name of Person)

at (202) 471-5944

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
08 JAN 18 AM 8:00
DIVISION OF CORPORATIONS

December 7, 2007

HEATHER ROSS
% RISK SERVICES
2233 WISCONSIN AVENUE, N.W., SUITE 310
WASHINGTON, DC 20007

SUBJECT: CITADEL INSURANCE CO., RISK RETENTION GROUP
Ref. Number: W07000059509

We have received your document for CITADEL INSURANCE CO., RISK RETENTION GROUP and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The date of incorporation listed for your corporation on your form must match the date on the certificate of existence.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap
Regulatory Specialist II

Letter Number: 107A00069115

**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. Citadel Insurance, Risk Retention Group, 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. Nevada

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

3. 20-8725275

(FEI number, if applicable)

4. 1/22/07

(Date of incorporation)

5. Perpetual

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

6. _____

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

7. 5430 W. Sahara Avenue; Las Vegas, Nevada, 89146

(Principal office address)

c/o Risk Services, 2233 Wisconsin Ave., N.W., Suite 310, Washington, DC, 20007

(Current mailing address)

8. Please See Attachment 1

(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: Michael T. Rogers

Office Address: 1800 Second Street, Suite 909

Sarasota, Florida 34236

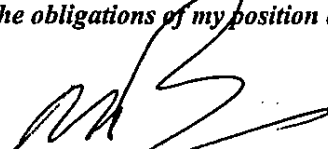
(City)

(Zip code)

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TALLAHASSEE, FLORIDA

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.



(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.

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

A. DIRECTORS

~~xxxxxxx~~ **George Dale**
Chairman

Address: **3415 S. Sepulveda Blvd., Suite 900**
Los Angeles, CA 90034

~~xxxxxxxxx~~ **Paul Bryan**

Address: **3415 S. Sepulveda Blvd., Suite 900**
Los Angeles, CA 90034

Director: **Ronald Landram**

Address: **5430 W. Sahara Avenue**
Las Vegas, NV 89146

Director: _____

Address: _____

B. OFFICERS

President: **George Dale**

Address: **3415 S. Sepulveda Blvd., Suite 900**
Los Angeles, CA 90034

Vice President: **Paul Bryan**

Address: **3415 S. Sepulveda Blvd., Suite 900**
Los Angeles, CA 90034

Secretary: **Dianne Haines**

Address: **3415 S. Sepulveda Blvd., Suite 900, Los Angeles, CA 90034**

Treasurer: **Jane Onssy Anis**

Address: **3415 S. Sepulveda Blvd., Suite 900, Los Angeles, CA 90034**

*** SEE ATTACHMENT 2 FOR ADDITIONAL OFFICERS***

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. **Heather Ross, Assistant Secretary**

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

**FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS**

Citadel Insurance ~~Cor.~~ Risk Retention Group

Attachment 1: Purpose

Question 8: Purpose(s) of corporation authorized in home state or country to be carried out in the State of Florida:

- 5.1 The primary purpose for which this Corporation is to be an association captive insurance company as defined in NRS, 694C, and any other relevant sections of the Nevada Revised Statutes, as amended. Specifically, the purpose for which the Corporation is organized is to enter into contractual agreements with policyholders to offer some or all of the benefits of a program of captive insurance, insuring the risks of such policyholders. The Company shall further operate as a risk retention group pursuant to the Product Liability Risk Retention Act of 1981 (the "Act"), as amended, 15 U.S.C., Sections 301 *et seq.*, and any other relevant state and federal statutes.
- 5.2 Subject to any limitation by statute or regulation, the Corporation may engage in any lawful act or activity for which an insurance company may be organized under the laws of the State of Nevada and pursuant to the Act. Accordingly, the Corporation shall be authorized to:
- 5.2.1 Act as a stock insurer and association captive insurance company in the following classes of insurance as designated by Title 57 of the Nevada Revised Statutes, and any other Nevada Revised Statutes relating to insurance companies, subject to approval by the Insurance Commissioner of the State of Nevada:
- (a) All casualty insurance.
- 5.2.2 Subject to any applicable limitations under the Act and pursuant to any other applicable state and/or federal law, to do and transact any and every other kind of business which is permitted under the general Corporation and applicable insurance laws of the State of Nevada as now in force or as hereafter amended, and to transact any other lawful business for which Corporations may be incorporated under Title 78 of the Nevada Revised Statutes, as amended. The Corporation has all powers necessary or proper to carry on its business.

**FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS**

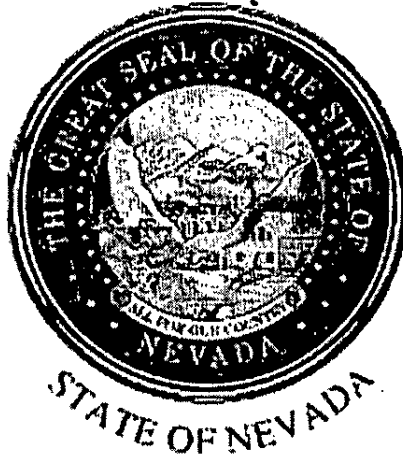
Citadel Insurance Co., Risk Retention Group

Attachment 2: Additional Officers

Continuation of Question 12(B)

Heather Ross
Assistant Secretary
Risk Services
2233 Wisconsin Avenue, N.W., Suite 310
Washington, D.C. 20007

SECRETARY OF STATE



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, 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, **CITADEL INSURANCE, RISK RETENTION GROUP**, 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 January 22, 2007, 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 November 28, 2007.

ROSS MILLER
Secretary of State

By

Certification Clerk