F95000002405

CHUBB

CHUBB GROUP INC.

15 Mountain View Road, P.O. Box 1615, Warren, NJ 07061-1615

Phone: (908) 903-2387
Fax: (908) 903-2660

April 14, 1995

Qualification/Registration Section
Division of Corporations
409 E. Gaines St. Tallahassee, FL 32399

300001458693
-04/18/95--01039--022
****131.25 ****131.25

W95-8309

Re: Chubb Indemnity Insurance Company
Application for Authority

Dear Sir or Madam:

Enclosed is Chubb Indemnity Insurance Company's Application for Authority to Transact Business in Florida and a check for $131.25 as payment for the following:

$35.00	Filing Fee
$35.00	Registered Agent Designation Fee
$ 8.75	Certificate of Status
$52.50	Certified Copy

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY 17 AM 9:22

Thank you for your assistance. Please let me know whether you need any additional information.

Very truly yours,

Patricia Key
Tax Counsel

FL040795.CI

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

April 18, 1995

PATRICIA J. KEY
15 MOUNTAIN VIEW ROAD
WARREN, NJ 07059

SUBJECT: CHUBB INDEMNITY INSURANCE COMPANY
Ref. Number: W95000008309

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY 17 AM 9:24

We have received your document for CHUBB INDEMNITY INSURANCE COMPANY and your check(s) totaling $131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

I have received your copy of articles of incorporation and other information, but in order to file this application you would need to obtain a certificate of existence from your Secretary of State. A sample of a certificate is enclosed. The phone number is (317) 232-6576.

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 (904) 487-6097.

Michael Mays
Corporate Specialist

Letter Number: 095A00018154

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY 17 AM 9:22

TO: QUALIFICATION/REGISTRATION SECTION
DIVISION OF CORPORATIONS

SUBJECT: Chubb Indemnity Insurance Company
(Name of corporation)

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:

Patricia J. Key
(Name of Person)

Chubb Group of Insurance Companies
(Firm/Company)

15 Mountain View Road
(Address)

Warren, New Jersey 07059
(City, State and Zip Code)

Should you need to call someone concerning this matter, please call:

Patricia J. Key (Name of Person) at (908) 903 - 2387 . Area Code & Daytime Telephone Number

COURIER ADDRESS:
Qualification/Registration Sec.
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Qualification/Registration Sec.
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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. Chubb Indemnity Insurance Company
(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 York
(State or country under the law of which it is incorporated)

3. 22-3291862
(FEI number, if applicable)

4. 12/5/22
(Date of incorporation)

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

6. N/A, initial application
(Date first transacted business in Florida. *(See sections 607.1501, 607.1502, and 817.155, F.S.)*

7. 15 Mountain View Road
Warren, New Jersey 07059
(Current mailing address)

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MAY 17 AM 9:22
SECRETARY OF STATE
DIVISION OF CORPORATIONS

8. Property/Casualty insurance company
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent:

Name: Insurance Commissioner

Office Address: Capitol

Tallahassee, Florida, 32399-0300
(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.

Insurance Commissioner
(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 addresses of officers and/or directors:

A. DIRECTORS

Chairman: SEE LIST ATTACHED

Address: _____

_____

Vice Chairman: _____

Address: _____

_____

Director: _____

Address: _____

_____

Director: _____

Address: _____

_____

B. OFFICERS

President: SEE LIST ATTACHED

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. _____ 4/14/95
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Henry G. Gulick, Secretary
(Typed or printed name and capacity of person signing application)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY 17 AM 9:23

CHUBB INDEMNITY INSURANCE COMPANY

BOARD OF DIRECTORS

Robert P. Crawford, Jr.
Gail B. Devlin
David L. Duffy
George R. Fay
David S. Fowler
Henry G. Gulick
Walter P. Guzzo
David G. Hartman
Gary L. Heard
Frederick L. Hyer, Jr.
Charles M. Luchs
Dean R. O'Hare
Philip J. Sempier
Paul H. Stewman

ELECTED OFFICERS

CHAIRMAN & PRESIDENT
Dean R. O'Hare

VICE PRESIDENTS

Robert P. Crawford, Jr.
Frederick L. Hyer, Jr.
Charles M. Luchs
Robert A. Marzocchi
Paul H. Stewman

VICE PRESIDENT & ACTUARY
David G. Hartman

VICE PRESIDENT & SECRETARY
Henry G. Gulick

VICE PRESIDENT & TREASURER
Philip J. Sempier

Certificate of Good Standing

STATE OF NEW YORK

INSURANCE DEPARTMENT

EDWARD J. MUHL
SUPERINTENDENT OF INSURANCE

It is hereby certified that

CHUBB INDEMNITY INSURANCE COMPANY
of New York, New York

was incorporated under the laws of the State of New York on November 22, 1922 ; that it changed its name to SUN INDEMNITY COMPANY OF NEW YORK on November 2, 1922 and was licensed to transact insurance business in the State of New York on December 5, 1922; that it changed its name to SUN INSURANCE COMPANY OF NEW YORK on July 1, 1955; that it changed its name to CHUBB INDEMNITY INSURANCE COMPANY on March 17, 1994.

IT IS HEREBY FURTHER CERTIFIED that the aforesaid Company is duly authorized in the State of New York to transact the business of fire, miscellaneous property, water damage, burglary and theft, glass, boiler and machinery, elevator, animal, collision, personal injury liability, property damage liability, workers' compensation and employers' liability, fidelity and surety, motor vehicle and aircraft physical damage, marine and inland marine, and marine protection and indemnity insurance, as specified in paragraphs 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 19, 20, and 21 of Section 1113(a) of the New York Insurance Law and has been continuously licensed and remains in good standing to the date of this certificate.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY 17 AM 9:23

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of this Department at the City of Albany, New York, this 5th day of May 1995.

EDWARD J. MUHL
Superintendent of Insurance

By

Special Deputy Superintendent