# F98000006477

To: Qualification/Tax Lien Section

**Division of Corporations** 

SUBJECT: AEGIS CORPORATION

500002644065---E -09/21/38--01008--010 \*\*\*\*\*78.75 \*\*\*\*\*78.75

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. An additional fee of \$8.75 has been enclosed to receive a copy of the Certificate.

Please return all correspondence concerning this matter to the following:

Aon Technical Insurance Services, Inc. ATTN: Gloria Goldbranson 123 N. Wacker Drive, 3<sup>rd</sup> Floor Chicago, IL 60606

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

Gloria Goldbranson at 312-701-1690.

Mailing Address:

Qualifications/Tax Lien Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

At 11/30

SECRETARY OF STATENS DIVISION OF CORPORATIONS 98 NOV 30 AM 11: 50



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

September 22, 1998

GLORIA GOLDBRANSON AON TECHNICAL INSURANCE SERVICES, INC. 123 N. WACKER DR, 3RD FLOOR CHICAGO, IL 60606

SUBJECT: AEGIS CORPORATION Ref. Number: W98000021654

We have received your document for AEGIS CORPORATION and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

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 (850) 487-6092.

Letter Number: 998A00047749

Hart Collins Senior Corporate Section Administrator

## RESOLUTION OF BOARD OF DIRECTORS

I, Robert D. Wurtz, President, do hereby certify that this Resolution of the Board of Directors of Aegis Corporation, a corporation duly organized and exiting under the laws of the State of Wisconsin, was duly adopted on November 30,1992. Be it resolved, that Aegis Corporation organized and existing in the State of Wisconsin, hereby adopts the name

\*\*PRINCIPAL TUSURANCE MANAGERS\*\*, for use in Florida.

THE

Dated: NOVEMBER 11, 1998

Signature of President

Robert D. Wurtz

98 NOV 30 AM 11: 50

## 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  | Aegis Corporat  | ion                  |   |                       |        |  |  |  |  |
|--|---|----------------------|---|-----------------------|--------|--|--|--|--|
|  | (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or |                      |   |                       |        |  |  |  |  |
|  | eviations of like import in language a  |                      |   | on instead of a       |        |  |  |  |  |
| natural persor                                 | or partnership if not so contained in   | the name             | e at present.)                            |                       | -      |  |  |  |  |
|  |   |                      |   |                       |        |  |  |  |  |
| 2  | Wisconsin   |                      | 3. <u>39–1743077</u>                      |                       |        |  |  |  |  |
| (State or coun                                 | Wisconsin<br>ry under the law of which it is incorp                                     | orated)              | (FEI number                               | , if applicable)      |        |  |  |  |  |
| 4. Novemb                                      | er 30, 1992   | <b>5</b> .           | Perpetual                                 |                       |        |  |  |  |  |
| (I   | rate of incorporation)  |                      | (Duration: Year corp. will cease          | to exist or "perpetua | ıl")   |  |  |  |  |
|  | <u>-</u>  |                      |   |                       | •      |  |  |  |  |
| 6. <u>N</u>                                    | /A st transacted business in Florida.) (SF  | CD 0500              | TONG 607 1501 607 1502 100                | 15.155 7.51           |        |  |  |  |  |
| (Date fi                                       | rst transacted business in Florida.) (St  | EE SECT              | TONS 607, 1501, 607, 1502 and 8.          | 17.155, F.S.)         |        |  |  |  |  |
| 71   | 8550 West Capitol Drive   |                      |   |                       |        | <u> </u>   |  |  |  |
| Th.  |   |                      |   |                       |        |  |  |  |  |
| Brokkfield, WI 53045 (Current mailing address) |   |                      |   |                       |        |  |  |  |  |
|  | (Caroni I   |                      |   |                       |        |  |  |  |  |
|  |   |                      |   |                       |        |  |  |  |  |
|  | orporation's primary busi   |                      |   |                       |        | <del></del>  |  |  |  |
| (Purpos  | e(s) of corporation authorized in hom   | ie state o           | r country to be carried out in state      | of Florida)           |        |  |  |  |  |
| 9. Name and st                                 | reet address of Florida registere   | d agent              | : (P.O. Box or Mail Drop Box              | NOT acceptable)       | ı      |  |  |  |  |
| Name:  | Ron Ponzoli, Esq.   |                      |   |                       |        |  |  |  |  |
| Name.  |   |                      |   | •                     |        |  |  |  |  |
| Office Address:                                | _3250 Mary Street, Suite  | 302                  |   |                       | 36     | ĭ  |  |  |  |
|  |   |                      | <del></del>                               |                       | =      | SOC  |  |  |  |
|  | Miami   |                      | . Florida 33133-523                       | 2                     | =      | <b>×</b> €   |  |  |  |
|  |   |                      | , Florida, <u>33133-523</u><br>(Zip code) | -                     | မ္     |  |  |  |  |
|  |   |                      | • • •                                     |                       | 200    | 20 E   |  |  |  |
| 10. Registered                                 | agent's acceptance:   |                      |   |                       |        | 2005<br>1005<br>1005<br>1005<br>1005<br>1005<br>1005<br>1005 |  |  |  |
|  |   |                      |   |                       | **     | <u>≥</u> ≥   |  |  |  |
| Having been nan                                | sed as registered agent and to accept   | service              | of process for the above stated co        | rporation at the pla  | ice de | signated   |  |  |  |
| in this application                            | t, I hereby accept the appointment a  | s register           | red agent and agree to act in this        | capacity. I further   | agre   | e to   |  |  |  |
| comply wan the p<br>and accent the ob          | rovisions of all statutes relative to th<br>ligations of my position as registered      | ie propei<br>d avent | ana complete performance of m             | y duties, and I am j  | famil  | iar with   |  |  |  |
|  | <b>2</b> 0 0  |                      |   |                       |        |  |  |  |  |
|  | * Kufel !!  | one                  | <u></u>                                   |                       |        |  |  |  |  |
|  | / (Domintone  | d 000001             | 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: (Street address ONLY - P.O. Box NOT acceptable)           |          |
|---|----------|
| A. DIRECTORS (Street address only - P.O. Box NOT acceptable)  |          |
| Chairman:   |          |
| Address:  |          |
|   |          |
| Vice Chairman:  |          |
| Address:  |          |
|   |          |
| Director: Robert D. Wurtz   |          |
| Address: 10186 State Highway 60   |          |
| Cedarburg, WI 53012   |          |
| Director: John A. Dirkse  |          |
| Address: 2451 North 93rd Street   |          |
| Wauwatosa, WI 53226   |          |
| B. OFFICERS (Street address only - P.O. Box NOT acceptable) (additional sheet attached)                         |          |
| President: Robert D. Wurtz  |          |
| Address: 10187 State Highway 60   |          |
| Cedarburg, WI 53012   | <u>.</u> |
| Exec. Vice President: John A. Dirkse  |          |
| Address: 2451 North 93rd Street   |          |
| Wauwatosa, WI 53226   | ·        |
| Secretary: Richard J. Green   |          |
| Address: 9766 Western Avenue  |          |
| Cedarburg, WI 53012   |          |
| Treasurer: Richard J. Green   |          |
| Address: 9766 Western Avenue  |          |
| Cedarburg, WI 53012   |          |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. |          |
| 13. For K. Leer HER   |          |
| (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)                   |          |
| 14. Paul R. Gurtler Vice President  (Typed or printed name and capacity of person signing application)          | <u></u>  |

State of Florida Application for Foreign Corporation for Authorization to Transact Business in Florida

### 12. B. Officers continued

| Name   | Paul R. Gurtler, Vice President    |      |                 |       |     |          |       |
|--|------------------------------------|------|-----------------|-------|-----|----------|-------|
| Address:   | N71 W27166 Hansen Drive            | City | Sussex          | State | WI  | Zip Code | 53089 |
| Name -   | Karen M. Flynn, Vice President     |      |                 |       |     |          |       |
| Address;   | 601 Columbia Avenue                | City | South Milwaukee | State | _Wt | Zip Code | 53172 |
| Name   | David G. Bisek, Vice President     |      |                 |       |     |          |       |
| Address:   | 3058 South 94 <sup>th</sup> Street | City | West Allis      | State | WI  | Zip Code | 53227 |
| Name Richard J. Green, Vice President, Secretary/Treasurer |                                    |      |                 |       |     |          |       |
| Address:   | 9766 Western Avenue                | City | Cedarburg       | State | _WI | Zip Code | 53012 |
| Name .   | Kim R. Hurtz, Vice President       |      |                 |       |     |          |       |
| Address:   | W161 N10942 Hidden Glen Court      | City | Germantown      | State | WI  | Zip Code | 53022 |

DFI/CCS/Corp \* Fm 31-A (7/96) - Printed on Recycled Paper

United States of America

State of Wisconsin

#### DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Present Shall Come, Greeting:

I, RICHARD L. DEAN, Secretary, Department of Financial Institutions, do hereby certify that

AEGIS CORPORATION

is a domestic corporation organized under the laws of this state and that its date of incorporation is NOVEMBER 30, 1992.

SECRETARY OF STATE ON STATE OF CORPORATIONS.

I further certify that said corporation has, during its most recently completed report year, filed with this department an annual report required by sec. 180.1622, 180.1921, or 181.651 of the Wisconsin Statutes, and that it has not filed articles of dissolution.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on SEPTEMBER 1, 1998.

OF Financia, Indiana of Financia, Indiana of Wiscon, Indiana of Wiscon

Richard/L. Dean, Secretary
Department of Financial Institutions

BY: Patricia bleber

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.