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PICK-UP WAIT MAIL				
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enal Instructions to Filing Officer:				
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Office Use Only



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JAN 1 2 2023 K. Brumbley CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 156243 / 8359606

AUTHORIZATION: Conclude Man

COST LIMIT : \$ 2,000.00

ORDER DATE: November 23, 2022

ORDER TIME : 1:35 PM

ORDER NO. : 156243-230

CUSTOMER NO: 8359606

FOREIGN FILINGS

NAME: VALIDUS SPECIALTY, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER:

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREGO LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

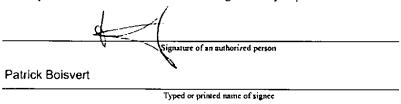
Delaware	name adopted for the purpose of dataseting outsites in the	orida. The alternate name must include "Limited Liability 98-0553749	company, L.E.C. or LLC.)	
(Jurisdiction under the law of which foreign limited liability company is organized)		7		
(Partition and Partition of the	the state of the s	(FGI durinet, 11 a)	ppnease;	
09/01/2018				
	(Date first transacted business in Florida, if prior to n (See sections 605,0904 & 605,0905, F.S. to determin	egistration.)	-	
4 World Trade Cent		4 World Trade Center		
reet Address of Principal Office)		6. (Mailing Address)		
ace Audies of Frincipal Office)		(Naming Address)		
150 Greenwich Street, 47th Floor		150 Greenwich Street, 47th Floor		
New York, NY 10007		New York, NY 10007		
		-	202	
Name and street addre	ss of Florida registered agent: (P.O. Box	NOT acceptable)	3 4	
			AN	
	Corporation Service Company		0	
Name:			>> (1	
	1201 Hays Street			
Office Address:			<u> </u>	
	Tallahassee	32301	΄΄ φ	
	(City)	, Florida		
	` ',	(Zip code)		
gistered agent's accep wing been named as re	itance: gistered agent and to accept service of pr	vacase for the above stated limited liabil.	its company at the plac	
	tion, I hereby accept the appointment as			
comply with the provisi	ions of all statutes relative to the proper a	and complete performance of my duties,	, and I am familiar with	
a accent the obligation	s of my position as registered agent.	0		
a accept the obligation.	Corporation Service Company (.)	A LOSA TOOL OLD		
w accept the obligation.	Corporation Service Company By:	YLUVA BANKU Assistant Vice President		

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
■ Manager	Name: Christopher Schaper	■Manager	Name: Patrick Boisvert
□Member	Address: 29 Richmond Road	□Member	Address:
□Authorized	Pembroke HM 08 Bermuda	□Authorized	Pembroke HM 08 Bermuda
Person		Person	
Other	□Other	Other	Other
≘ Manager	Name:	□Manager	Name:
□Member	Address: 29 Richmond Road	□Member	Address:
□Authorized	Pembroke HM 08 Bermuda	□Authorized	
Person		Person	
Other	Other	Other	
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	<u> </u>
Person		Person	
□Other	Other	Other	Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

- 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)
- 10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.





I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "VALIDUS SPECIALTY, LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE NINTH DAY OF JANUARY, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VALIDUS SPECIALTY, LLC" WAS FORMED ON THE THIRD DAY OF MAY, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



Authentication: 202450495

Date: 01-09-23