

P97000047036

Requestor's Name

THOMAS J. MAIDA 100182
1978 Chatsworth Way, 904-893-6487
Tallahassee, FL 32308

City/State/Zip

Phone #

224-3555

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #) 200002133952--3
-05/28/97--01036--020
****166.25 ****70.00

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☐ Walk in

☐ Pick up time _____

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
97 MAY 23 PM 2 43
SECRETARY OF STATE
TALLAHASSEE, FL 32304

70.00

Dmc 6/1/97

ARTICLES OF INCORPORATION
OF
BRIDGEFIELD EMPLOYERS INSURANCE COMPANY, AN ASSESSABLE MUTUAL

The undersigned incorporators to these Articles of Incorporation, natural persons over the age of eighteen years, competent to contract, and the majority of whom are citizens of the United States of America, hereby form a corporation for the purpose of operating as a mutual insurer under the laws of the State of Florida.

ARTICLE I
NAME

The name of the Corporation shall be Bridgefield Employers Insurance Company, an Assessable Mutual. The principal place of business of the corporation shall be 2310 A-Z Park Road, Lakeland, Polk County, Florida 33801.

ARTICLE II
NATURE OF BUSINESS

The Corporation is organized pursuant to Chapter 607 of the Florida Statutes. The purpose of the Corporation is to engage in the business of the types of property and casualty insurance for which it is authorized.

ARTICLE III
STOCK

The Corporation shall be owned by its policyholders and no stock shall be issued.

ARTICLE IV
CONTINGENT LIABILITY OF MEMBERS

Each member shall be liable for an assessment for each year as to which funds are insufficient to satisfy liabilities. The assessment of each member for a given year as to which a deficiency exists shall be based upon that member's pro rata share of the earned premiums for such year. However, the contingent liability of each member for any deficit for a given year shall not exceed three (3) times the annual premium for the member's policy at the annual premium rate applicable to the year as to which the deficiency exists, unless the corporation fails to maintain aggregate excess of loss reinsurance in accordance with Section 624.469, Florida Statutes, as amended from time to time, in which event the contingent liability shall be increased up to a maximum of ten (10) times annual premiums.

ARTICLE V
TERM OF EXISTENCE

The Corporation shall exist perpetually.

FILED
97 MAY 28 PM 2:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLE VI
INITIAL REGISTERED OFFICE AND AGENT**

The initial registered office of this Corporation shall be 2310 A-Z Park Road, Lakeland, Florida 33801, and the initial registered agent of this Corporation at such office shall be William B. Bull, who, upon accepting this designation agrees to comply with the provisions of Section 48.091, Florida Statutes, as amended from time to time, with respect to keeping an office to receive service of process from the Treasurer and Insurance Commissioner of the State of Florida.

**ARTICLE VII
DIRECTORS**

Section 1. The Corporation shall have at least five (5) directors initially, all of whom are United States citizens and all of whom are over the age of eighteen (18). The names and residence street addresses of the initial directors, whose initial terms of office shall be for one (1) year, are:

<u>Name</u>	<u>Address</u>
Robert L. Noojin, Sr.	4802 Woodmere Road Tampa, FL 33609
Thomas S. Petcoff	1212 Kells Court Lakeland, FL 33803
Robert Siegel	9271 SW 59th Street Miami, FL 33173
John Gray	1207 S. 8th Street Leesburg, FL 34748
Greg C. Branch	1501 SW 42nd Street Ocala, FL 34474
C.C. Dockery	2627 Oakland Avenue Lakeland, FL 33803
William B. Bull	4524 Nunnswood Lane Lakeland, FL 33813

The Board of Directors of the assessable mutual insurer shall:

- (A) Be responsible to members of the insurer;
- (B) Appoint independent certified public accountants, legal counsel, actuaries, and investment advisors as needed;

- (C) Approve payment of dividends to members; and
- (D) Approve changes in corporate structure.

The majority of the directors shall be individual members of, or owners, partners, officers, directors, or employees of one or more members of, the insurer.

If the Board of Directors contracts with an administrator authorized under Section 626.88, Florida Statutes, to administer the day-to-day affairs of the fund, a member of the Board of Directors is not personally liable for monetary damages to any person for any statement, vote, decision, or failure to act, regarding the management or policy of the fund, by a director, unless:

- (a) The director breached or failed to perform his duties as a director; and
- (b) The director's breach of or failure to perform his duties constitutes:

(1) A violation of the criminal law, unless the director had reasonable cause to believe his conduct was lawful or had no reasonable cause to believe his conduct was unlawful. A final judgment or other final adjudication against a director in any criminal proceeding for violation of the criminal law estops that director from contesting the fact that his breach, or failure to perform, constitutes a violation of the criminal law; but does not estop the director from establishing that he had reasonable cause to believe that his conduct was lawful or had no reasonable cause to believe that his conduct was lawful.

(2) A transaction from which the director derived an improper personal benefit, either directly or indirectly; or

(3) Recklessness or an act or omission which was committed in bad faith or with malicious purpose or in a manner exhibiting wanton and willful disregard of human rights, safety, or property. For purposes of these articles of incorporation, the term "recklessness" means the acting, or omission to act, in conscious disregard of a risk:

- (a) Known, or so obvious that it should have been known, to the director;
and
- (b) Known to the director, or so obvious that it should have been known, to be so great as to make it highly probable that harm would follow from such action or omission.

ARTICLE VIII INCORPORATORS

The names and residence street addresses of the incorporators, all of whom are over the age of eighteen, and all of whom (or the majority of whom, if applicable) are United States citizens are:

<u>Name</u>	<u>Address</u>
Robert L. Noojin, Sr.	4802 Woodmere Road Tampa, FL 33609
Thomas S. Petcoff	1212 Kells Court Lakeland, FL 33803
Robert Siegel	9271 SW 59th Street Miami, FL 33173
John Gray	1207 S. 8th Street Leesburg, FL 34748
Greg C. Branch	1501 SW 42nd Street Ocala, FL 34474
C.C. Dockery	2627 Oakland Avenue Lakeland, FL 33803
William B. Bull	4524 Nunnswood Lane Lakeland, FL 33813
Russell Wall	2936 Forrest Drive Lakeland, FL 33811
Georgia Collis	4524 Nunnswood Lane Lakeland, FL 33813
David Cedarholm	113 W. Christina Boulevard Lakeland, FL 33813

THE INCORPORATORS have hereunto set their hands and seals this 27th day of May, 1997.

APPROVED
INSURANCE COMMISSIONER
AND TREASURER

MAR 18 1997

BY


Legal Division

x 
William B. Bull

STATE OF Florida
COUNTY OF Polk

BEFORE ME, the undersigned authority, personally appeared William B. Bull, who is personally known to me ~~or who has produced~~ _____, as identification, and he acknowledged to me that he executed the foregoing Articles of Incorporation voluntarily and for the purposes therein expressed.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 28th day of May, 1997.


NOTARY PUBLIC

My Commission Expires:

(SEAL)



DALENE J. BROWN
My Comm Exp. 1/22/2001
Bonded By Service Ins
No. CC611762
☒ Personally Known ☐ Other I.D.

Dalene J. Brown, Notary Public
Commission #CC611762

Robert L. Noojin
Robert L. Noojin, Sr.

STATE OF Florida
COUNTY OF Hillsborough

BEFORE ME, the undersigned authority, personally appeared Robert L. Noojin, Sr., who is personally known to me or who has produced _____, as identification, and he acknowledged to me that he executed the foregoing Articles of Incorporation voluntarily and for the purposes therein expressed.

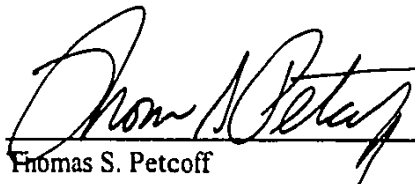
IN WITNESS WHEREOF, I have hereunto set my hand and seal this 30th day of May, 1997.

(SEAL)

Jacqueline J. Dyer
NOTARY PUBLIC
My Commission Expires:



JACQUELINE J. DYER
MY COMMISSION # CC439521 EXPIRES
February 16, 1999
BONDED THRU TROY FAIR INSURANCE, INC.


Thomas S. Petcoff

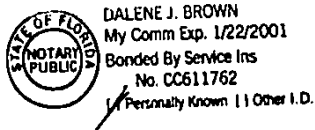
STATE OF Florida
COUNTY OF Polk

BEFORE ME, the undersigned authority, personally appeared Thomas S. Petcoff, who is personally known to me ~~or who has produced _____~~, as identification, and he acknowledged to me that he executed the foregoing Articles of Incorporation voluntarily and for the purposes therein expressed.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 30th day of May, 1997.


NOTARY PUBLIC
My Commission Expires:

(SEAL)

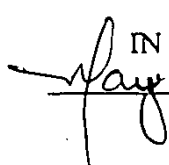


Dalene J. Brown, Notary Public
Commission #CC611762

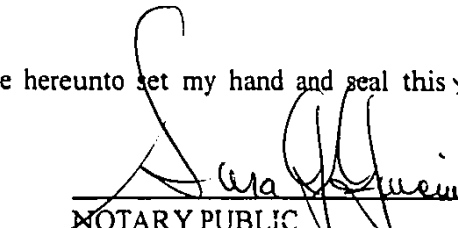

Robert Siegel

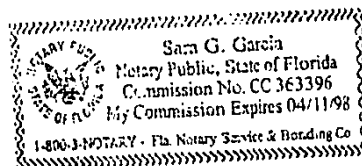
STATE OF Florida
COUNTY OF Dade

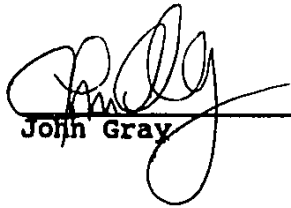
BEFORE ME, the undersigned authority, personally appeared Robert Siegel, who is personally known to me or who has produced _____, as identification, and he acknowledged to me that he executed the foregoing Articles of Incorporation voluntarily and for the purposes therein expressed.

 IN WITNESS WHEREOF, I have hereunto set my hand and seal this 30th day of _____, 1997.

(SEAL)


NOTARY PUBLIC
My Commission Expires:



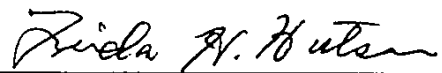

John Gray

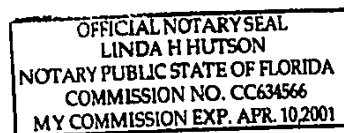
STATE OF FLORIDA

COUNTY OF LAKE

BEFORE ME, the undersigned authority, personally appeared JOHN GRAY, who is personally known to me, and he acknowledged to me that he executed the forgoing Articles of Incorporation voluntarily and for the purposes therein expressed.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 2nd day of June, 1997.


Printed Name: _____
Notary Public State of Florida
Commission Number: _____
My Commission Expires: _____



Greg C. Branch
Greg C. Branch

STATE OF Florida

COUNTY OF Marion

BEFORE ME, the undersigned authority, personally appeared Greg C. Branch, who is personally known to me or who has produced _____, as identification, and he acknowledged to me that he executed the foregoing Articles of Incorporation voluntarily and for the purposes therein expressed.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 30TH day of may, 1997.

Christine A. Gledden

NOTARY PUBLIC

My Commission Expires: June 25, 2000

(SEAL)





C.C. Dockery

STATE OF Florida
COUNTY OF Dick

BEFORE ME, the undersigned authority, personally appeared C.C. Dockery, who is personally known to me ~~or who has produced~~ _____, as identification, and he acknowledged to me that he executed the foregoing Articles of Incorporation voluntarily and for the purposes therein expressed.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 30th day of May, 1997.



NOTARY PUBLIC

My Commission Expires:

(SEAL)



DALENE J. BROWN
My Comm Exp. 1/22/2001
Bonded By Service Ins
No. CC611762
☒ Personally Known () Other I.D.

Dalene J. Brown, Notary Public
Commission #CC611762



Russell Wall

STATE OF Florida
COUNTY OF Polk

BEFORE ME, the undersigned authority, personally appeared Russell Wall, who is personally known to me ~~or who has produced~~ _____, as ~~identification~~, and he acknowledged to me that he executed the foregoing Articles of Incorporation voluntarily and for the purposes therein expressed.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 30th day of May, 1997..



NOTARY PUBLIC

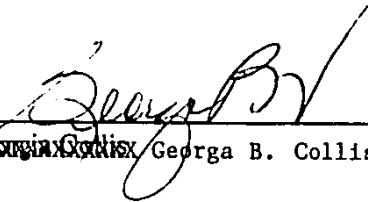
My Commission Expires:

(SEAL)



DALENE J. BROWN
My Comm Exp. 1/22/2001
Bonded By Service Ins
No. CC611762
☒ Personally Known ☐ Other I.D.

Dalene J. Brown, Notary Public
Commission #CC611762


X~~Georgia B. Collis~~ Georgia B. Collis

STATE OF Florida
COUNTY OF Dade

BEFORE ME, the undersigned authority, personally appeared Georgia Collis, who is personally known to me ~~or who has produced~~ _____, ~~as identification, and she~~ acknowledged to me that he executed the foregoing Articles of Incorporation voluntarily and for the purposes therein expressed.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 30th day of May, 1997.

(SEAL)


NOTARY PUBLIC
My Commission Expires:

David T. Cederholm
~~David Cederholm~~ David T. Cederholm

STATE OF Florida
COUNTY OF Polk

BEFORE ME, the undersigned authority, personally appeared David Cedarholm, who is personally known to me ~~or who has produced _____~~ as identification, and he acknowledged to me that he executed the foregoing Articles of Incorporation voluntarily and for the purposes therein expressed.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 30th day of May, 1997.

Dalene J. Brown
NOTARY PUBLIC
My Commission Expires:

(SEAL)



DALENE J. BROWN
My Comm Exp. 1/22/2001
Bonded By Service Ins
No. CC611762
☒ Personally Known ☐ Other I.D.

Dalene J. Brown, Notary Public
Commission #CC611762

ACCEPTANCE

I HEREBY ACCEPT the appointment to act in the capacity of Registered Agent and Resident Agent and agree to comply with the provisions of the laws of the State of Florida relative to keeping said offices open.

x William B. Bull
[Name]
Registered Agent

STATE OF Florida
COUNTY OF Dade

BEFORE ME, the undersigned authority, personally appeared William B. Bull, who is personally known to me or who has produced _____, as identification, and he acknowledged to me that he executed the foregoing Articles of Incorporation voluntarily and for the purposes therein expressed.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 28th day of May, 1997.

Dalene J. Brown
NOTARY PUBLIC
My Commission Expires:

(SEAL)



DALENE J. BROWN
My Comm Exp. 1/22/2001
Bonded By Service Ins
No. CC611762
[] Personally Known [] Other I.D.

Dalene J. Brown, Notary Public
Commission #CC611762

FILED
97 MAY 28 PM 2:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA