

F98000003752  
TRANSMITTAL LETTER

TO: QUALIFICATION/TAX LIEN SECTION  
DIVISION OF CORPORATIONS

SUBJECT: Frankenmuth Mutual Insurance Company  
(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:

Jodi G. Lash  
(Name of Person)  
J. Lash & Company  
(Firm/Company)  
40 Winterberry Lane  
(Address)  
Moreland Hills, Ohio 44022  
(City, State and Zip Code)

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\*\*\*\*\*78.75 \*\*\*\*\*78.75

W98-12371

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

Jodi G. Lash at ( 440 ) 248 12117  
(Name of Person) Area Code & Daytime Telephone Number

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

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

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FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

June 1, 1998

JODI G. LASH  
J. LASH & COMPANY  
40 WINTERBERRY LANE  
MORELAND HILLS, OH 44022

SUBJECT: FRANKENMUTH MUTUAL INSURANCE COMPANY  
Ref. Number: W98000012371

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

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 487-6097.

Michael Mays  
Document Specialist

Letter Number: 998A00030517

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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. Frankenmuth Mutual 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. Michigan 3. 38-0555290  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. September 15, 1921 5. perpetual  
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Not applicable  
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.)

7. One Mutual Avenue  
Frankenmuth, Michigan 48787-0001  
(Current mailing address)

8. To transact property/casualty insurance  
(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.

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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)  
Please see Attachment A.

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

Please see Attachment A.

President: \_\_\_\_\_

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. Gerald J. Stanton  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Gerald Lynn Stanton, President and Chief Executive Officer, Director  
(Typed or printed name and capacity of person signing application)

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ATTACHMENT A  
FRANKENMUTH MUTUAL INSURANCE COMPANY  
LIST OF OFFICERS AND DIRECTORS

**OFFICERS**

Gerald L. Stanton  
President & CEO  
Frankenmuth Mutual Insurance Company  
One Mutual Avenue  
Frankenmuth, Michigan 48787-0001

Morrall Manuel Claramunt  
Executive Vice President & Secretary  
Frankenmuth Mutual Insurance Company  
One Mutual Avenue  
Frankenmuth, Michigan 48787-0001

John Stewart Benson  
Treasurer & CFO  
Frankenmuth Mutual Insurance Company  
One Mutual Avenue  
Frankenmuth, Michigan 48787-0001

Gerald Clifton Webb  
Senior Vice President  
Frankenmuth Mutual Insurance Company  
One Mutual Avenue  
Frankenmuth, Michigan 48787-0001

David Frederick Honold  
Senior Vice President  
Frankenmuth Mutual Insurance Company  
One Mutual Avenue  
Frankenmuth, Michigan 48787-0001

**DIRECTORS**

Gerald L. Stanton  
Frankenmuth Mutual Insurance Company  
One Mutual Avenue  
Frankenmuth, Michigan 48787-0001

Morrall Manuel Claramunt  
Frankenmuth Mutual Insurance Company  
One Mutual Avenue  
Frankenmuth, Michigan 48787-0001

Harvey Ernst Kern  
Chairman  
Frankenmuth Mutual Insurance Company  
One Mutual Avenue  
Frankenmuth, Michigan 48787-0001

David Richard Johnston  
TW Johnston & Sons, Ltd.  
435 North Main  
Frankenmuth, Michigan 48734

Jacob Joseph Rehmann  
Rehmann Robson P.C.  
5800 Gratiot Road  
Saginaw, Michigan 48603

Christopher A. Nuechterlein  
U.S. Department of Justice  
555 Capital Mall  
Sacramento, California

David Allen Pendleton  
Smith Barney  
4760 Fashion Square Blvd.  
Saginaw, Michigan 48604

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**CERTIFICATE OF COMPLIANCE**

Michigan Insurance Bureau

Effective Date: May 8, 1998

THIS IS TO CERTIFY, that

**FRANKENMUTH MUTUAL INSURANCE COMPANY**  
( Michigan mutual insurer )  
NAIC No. 13986

is organized under the laws of this State and is authorized to issue policies and transact business under the following Sections of the Insurance Code of 1956, as amended:

- Chapter 06 - Section 610 - Property
- Chapter 06 - Section 614 - Ocean Marine
- Chapter 06 - Section 616 - Inland Marine
- Chapter 06 - Section 620 - Automobile Insurance - limited
- Chapter 06 - Section 624 - SubSection 1a - Casualty: Steam Boiler, Flywheel & Machinery
- Chapter 06 - Section 624 - SubSection 1b - Casualty: Liability
- Chapter 06 - Section 624 - SubSection 1b - Casualty: Automobile
- Chapter 06 - Section 624 - SubSection 1b - Casualty: Workers' Compensation
- Chapter 06 - Section 624 - SubSection 1c - Casualty: Plate Glass
- Chapter 06 - Section 624 - SubSection 1d - Casualty: Sprinkler and Water Damage
- Chapter 06 - Section 624 - SubSection 1f - Casualty: Burglary and Theft
- Chapter 06 - Section 624 - SubSection 1g - Casualty: Livestock
- Chapter 06 - Section 624 - SubSection 1h - Casualty: Malpractice
- Chapter 06 - Section 625 - Disability coverage supplemental to Auto Insurance
- Chapter 06 - Section 628 - Surety & Fidelity

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*By: Carol Ostrowski*  
—Director, Company Admissions Division