

FO6000004887

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

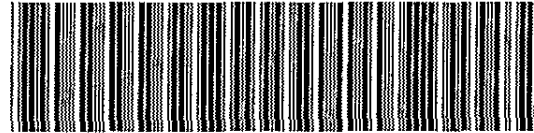
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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07/25/06--01007--007 **78.75

USE FOR
COURT REPORT
06 JUL 25 PM 1:36

B. McKnight JUL 25 2006



CHUBB LICENSING SERVICES LLC

15 Mountain View Road, P.O. Box 1615, Warren, New Jersey 07061-1615 • T: 800 824-6717 F: 908 903-4245

July 17, 2006

Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Certificate of Authority
STATE OF FLORIDA

Please issue a Certificate of Authority to The Segal Company (Southeast), Inc. so that the organization can transact business in the Florida. Enclosed are the following:

1. Application for Certificate of Authority
2. Certificate of Existence
3. Chubb Licensing Services check in the amount of \$78.75

If there is any need for this application to be returned, please return to:

Chubb Licensing Services LLC
15 Mountain View Road
Warren, NJ 07059
ATTN: Steve Lawrence

Thank you for your cooperation.

Steve Lawrence
Licensing Associate
Chubb Licensing Services LLC
(908) 903-2367

Encl.

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: The Segal Company (Southeast), Inc.

(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:

Steve Lawrence

(Name of Person)

Chubb Licensing Services LLC

(Firm/Company)

15 Mountain View Road

(Address)

Warren, NJ 07059

(City/State and Zip code)

For further information concerning this matter, please call:

Steve Lawrence

(Name of Person)

at (908) 903-5760

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☒ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy

**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. The Segal Company (Southeast), Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Georgia

(State or country under the law of which it is incorporated)

3. 13-2619259

(FEI number, if applicable)

4. 10/16/1968

(Date of incorporation)

5. perpetual

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

6. N/A

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 2018 Powers Ferry Road Suite 850 Atlanta, GA 30339-5003

(Principal office address)

2018 Powers Ferry Road Suite 850 Atlanta, GA 30339-5003

(Current mailing address)

8. Insurance, actuarial, consulting

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name:

Corporation Service Company

Office Address:

1201 Hays Street

Tallahassee

(City)

Florida

32301

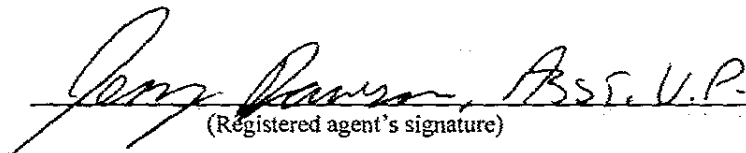
(Zip code)

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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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.


(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 business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Please see attached

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: _____

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. Ricardo D. Bartola - SVP, Treasurer, CFO

(Typed or printed name and capacity of person signing application)

**THE SEGAL COMPANY
INSURANCE LICENSE INFORMATION**

**NAMES AND BUSINESS ADDRESSES OF DIRECTORS & ELECTED OFFICERS FOR
THE SEGAL GROUP, INC., THE SEGAL COMPANY (EASTERN STATES, MIDWEST, &
SOUTHEAST STATES), AND THE SEGAL COMPANY, LTD.**

Effective June 16, 2006 through 2006 Annual Meeting

NAME	OFFICE	ADDRESS
Howard Fluhr	Chairman, Director	One Park Ave, New York, NY 10016
Joseph A. LoCicero	President and Chief Executive Officer, Director	One Park Ave, New York, NY 10016
Eugene Keilin	Outside Director	Keilin & Company 200 Park Avenue, New York, NY 10166
Merril S. Delon	Outside Director	140 Thompson Street, Apt 5C New York, NY 10012
J. Timothy Biddle	Director	120 Montgomery Street 5th Floor – Suite 500 San Francisco, CA 94104-4308
John Cotton	Director	116 Huntington Avenue 8th Floor Boston, MA 02116-5744
Ann Gineo	Director	30 Waterside Drive Suite 300 Farmington, CT 06032-3069
Myrna Hellerman	Director	101 North Wacker Drive Suite 400 Chicago, IL 60606
John DeMairo	Director	One Park Ave, New York, NY 10016
Ricardo DiBartolo	SVP, Treasurer & Chief Financial Officer	One Park Ave, New York, NY 10016
Frances Milberg	SVP, Secretary & General Counsel	One Park Ave, New York, NY 10016
*Andrew Sherman	Director / Insurance Compliance Officer – SEGALCO Insurance Agency	116 Huntington Avenue 8th Floor Boston, MA 02116-5744
*Brian L. Smith	SVP/ Insurance Compliance Officer – Eastern States	One Park Ave, New York, NY 10016
*Lawrence M. Singer	SVP/ Insurance Compliance Officer – Eastern States	One Park Ave, New York, NY 10016

*Robert Drozd	VP/ Insurance Compliance Officer - Midwest States	101 North Wacker Drive, Suite 500, Chicago, IL 60606
*Jeffrey L. Johnson	SVP/ Insurance Compliance Officer - Southeast States	2018 Powers Ferry Road, Suite 850, Atlanta, GA 30339-5003

*Appointed Position

STOCK OWNERSHIP

All subsidiaries are 100% wholly owned by The Segal Group, Inc. - An Employee Owned Company.

FINANCIAL INTEREST

Q. Identify any business in which the corporation has a financial interest.

A. *None*

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SEAL GROUP, INC.
DIVISION OF THE SEGAL GROUP

HIGHLY CONFIDENTIAL**SSNs of THE SEGAL COMPANY BOARD OF DIRECTORS & OFFICERS OF:****THE SEGAL COMPANY (EASTERN STATES, MIDWEST, SOUTHEAST & WESTERN STATES);
SEGALCO INSURANCE, SEGAL ADVISORS, INC.; AND THE SEGAL COMPANY, LTD.***Effective June 16, 2006 through 2006 Annual Meeting*

NAME(S)	OFFICE	SOCIAL SECURITY NUMBER(S)
Howard Fluhr	Chairman, Director	
Joseph A. LoCicero	President and Chief Executive Officer, Director	
Eugene Keilin	Outside Director	
Merril S. Delon	Outside Director	
J. Timothy Biddle	Director	
John Cotton	Director	
Ann D. Gineo	Director	
Myrna Hellerman	Director	
John DeMairo	Director	
Ricardo DiBartolo	SVP, Treasurer & Chief Financial Officer	
Frances Milberg	SVP, Secretary & General Counsel	
*Brian L. Smith	SVP/ Insurance Compliance Officer - Segal (Eastern States), Inc.	
*Lawrence M. Singer	SVP/ Insurance Compliance Officer - Segal (Eastern States), Inc.	
*Robert Drozd	VP/ Insurance Compliance Officer - Segal (Midwest), Inc.	
*Jeffrey L. Johnson	SVP/ Insurance Compliance Officer - Segal (Southeast), Inc.	
*Jordan Smith	Vice President/ Insurance Compliance Officer - Segal (Western States), Inc.	
*Regina C. Jackson	Broker/ Insurance Compliance Officer - Segal (Arizona), Inc.	
*Robin Dusang	VP/ Insurance Compliance Officer - Segal (Louisiana), Inc.	
*Albert LaCasse	VP/ Insurance Compliance Officer - Segal (Texas), Inc.	
*Andrew Sherman	SVP/ Insurance Compliance Officer - SEGALCO Insurance Agency	

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SECURITY DIVISION

Control No. A804658

STATE OF GEORGIA

Secretary of State

Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

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SECRETARY OF STATE
CORPORATIONS DIVISION
315 WEST TOWER
ATLANTA, GEORGIA 30334-1530

CERTIFICATE OF EXISTENCE

I, Cathy Cox, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

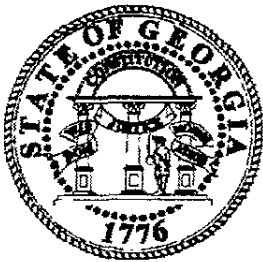
THE SEGAL COMPANY (SOUTHEAST), INC.

Domestic Profit Corporation

was formed or was authorized to transact business on 10/16/1968 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 27th day of June, 2006

Cathy Cox
Secretary of State