

LAW OFFICES OF  
**CRAIG A. JASLOW**  
ATTORNEY AT LAW  
9351 FONTAINEBLEAU BLVD.  
Suite B-307  
MIAMI, FLORIDA 33172  
(305) 220-6546  
Fax (305) 220-7585

**B95000000199**

May 7, 1995  
Qualification/Tax Lien Sec.  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

000001500560  
-05/26/95--01095--001  
\*\*\*1785.00 \*\*\*1785.00

Re: International Reinsurance Alliance, L.P.;  
IAM Holdings, Inc.

Dear Sir or Madam:

The enclosed "Application by Foreign Limited Partnership for Authorization to Transact Business in Florida" and "Affidavit for Capital Contributions" for International Reinsurance Alliance, L.P. and a check in the amount of \$1,785.00 are submitted to register the above referenced foreign limited partnership to transact business in Florida.

Also, the enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida" and "Certificate of Existence" for IAM Holdings, Inc. and a check in the amount of \$70.00 are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter following:

Craig A. Jaslow, Esq.  
9351 Fontainebleau Blvd.  
Suite B-307  
Miami, Florida 33172

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

Name	call: 5/15/95
Availability	acc
Document	
Examiner	Thank you for your assistance with this matter.
Updater	Sincerely,
Updater	
Verifier	
Acknowledgement	
	Craig A. Jaslow
W. P. Verifier	
Enc.	

CAJ:lj

Craig A. Jaslow, Esq. at (305) 220-6546.

m. Jaslow gave authorization to add  
supp'd 5/15/95  
acc

**B95000000199**

TC  
\$241,750.00

FILED  
MAY 15 1995  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

Florida Department of State, Jim Smith, Secretary of State

APPLICATION BY FOREIGN LIMITED PARTNERSHIP  
FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1. International Reinsurance Alliance, L.P., Ltd.  
(Name of limited partnership as it is in the home state;

2. \_\_\_\_\_  
(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida; must contain the word "LIMITED" or "LTD.")

3. Delaware 4. September 1, 1994  
(State of Formation) (Date of Formation)

5. Craig A. Jaslow, Esq.  
(Name of Registered Agent for Service of Process)

6. 9351 Fontainebleau Blvd., #B-307  
(Street Address of Registered Office)  
Miami, Florida 33172  
(City) (Zip Code)

7. Acceptance by the Registered Agent for Service of Process.

  
(Agent must sign on this line)  
National Corporate Research, Ltd.

8. 9 East Loockerman Street, Dover, Delaware 19901  
(Address of Registered Office required in State of Formation or, if not required, Address of Principal Office.)

9. NAME OF GENERAL PARTNERS

SPECIFIC ADDRESS

IAM Holdings, Inc.,  
a Delaware corporation

2600 Douglas Road, Suite 710  
Coral Gables, Florida 33134

F 95000002594

10. 2600 Douglas Road, Suite 710, Coral Gables, Florida 33134  
(Office where Names, Addresses and Contributions of Limited Partners are kept.)

11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is cancelled or withdrawn.

12. 2600 Douglas Road, Suite 710, Coral Gables, Florida 33134  
(Mailing Address of Limited Partnership)

FILED  
1995 MAY 26 AM 8:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

This 1st day of May, 1995.

IAM Holdings, Inc.

General Partner

By: [Signature]  
Lane A. Jaslow, President

STATE OF

Florida

COUNTY OF Dade

THE FOREGOING instrument was acknowledged and sworn to before me this 1st day of MAY, 1995, by Lane A. Jaslow, President (Name of General Partner) of

IAM Holdings, Inc., General Partner of International Reinsurance Alliance, L.P.

(Name of Limited Partnership), A Delaware (State or Country) Limited Partnership, on behalf of the Limited Partnership.

[Signature]  
Notary Public

State of Florida at Large

My Commission Expires:

(SEAL)



CRAG A. JASLOW  
Notary Public  
Bundled By  
No. CC  
TALLAHASSEE, FLORIDA

FILED  
MAY 26 AM 8:30



CRAG A. JASLOW  
My Comm. Exp. 4/21/98  
Bonded By Service Ins  
No. CC366309  
|| Potentially Harm || Other L.B.



CRAG A. JASLOW  
My Comm. Exp. 4/21/98  
Bonded By Service Ins  
No. CC366309  
|| Potentially Harm || Other L.B.

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS**

BEFORE ME, the undersigned, personally appeared Lane A. Jaslow, President of  
IAM Holdings, Inc., a  
general partner of International Reinsurance Alliance (an) P.  
Delaware, limited partnership, hereinafter referred to as the "Partnership", who  
certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 841,750.00.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 841,750.00.

This 1<sup>st</sup> day of MAY, 1995.

**FURTHER AFFIANT SAYETH NOT.**

Under penalties of perjury I declare that I have read the foregoing and that the facts are true, to the best of my knowledge and belief.

General Partner  
IAM Holdings, Inc.

By: [Signature]  
Lane A. Jaslow, President

FILED  
1995 MAY 26 AM 8:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

STATE OF Florida  
COUNTY OF Dade  
DATE May 1, 1995

BEFORE ME, the undersigned officer, a Notary Public authorized to administer oaths and to  
Lane A take acknowledgments in and for the State and County set forth above, personally appeared  
Jaslow, President of IAM Holdings, Inc. (General Partner, known to me and know by me to  
be the person who executed the foregoing Affidavit of Capital Contributions, and he acknowledged to me and before me that he executed this Affidavit as General Partner of said partnership.

IN WHITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the  
State and County aforesaid, this 1<sup>st</sup> day of May,  
19 95.

[Signature]  
Notary Public

Seal

State of \_\_\_\_\_ at Large  
My Commission Expires: \_\_\_\_\_



CRAIG A. JASLOW  
My Comm Exp. 4/21/98  
Bonded By Service Ins  
No. CC366309  
|| Personality Systems || 1-800-448-8888

FILE ON OR BEFORE APRIL 5, 1996 TO AVOID  
REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra Matham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
96 MAY 24 PM 12: 24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

1. Name of Limited Partnership

1a. DOCUMENT #  
**B95000000199**

**INTERNATIONAL REINSURANCE ALLIANCE, L.P., LTD.**

Mailing Address

2000 DOUGLAS ROAD, SUITE 710  
CORAL GABLES FL 33134

Principal Office Address

2000 DOUGLAS ROAD, SUITE 710  
CORAL GABLES FL 33134

2. New Mailing Address, If Applicable

Suite, Apt. #, etc.

City, State & Zip

2a. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City, State & Zip

If above addresses are incorrect in any way, line through the incorrect information and enter correct address in Block 2 and/or 2a.

3. Date Formed or Registered to Do Business in  
FLORIDA  
**05/26/1995**

3a. Date of Last Report

4. State or Country of Formation  
**DE**

5a. Capital Contributions as Shown  
on Record  
**\$841,750.00**

5b. Amount of Capital Contributions in  
FLORIDA in date  
**\$ 841,750**

6. FEI Number  
**65-05231727**

Applied For

Not Applicable

7. CERTIFICATE OF STATUS REQUIRED

YES ☐ NO ☐

8. FEES: 1.) Filing Fee: Computed at a rate of \$7 per \$1,000 on amount entered in 5b or 5a if 5b blank, with a minimum filing fee of \$52.50 and a maximum of \$437.50.  
2.) Supplemental Fee: \$138.75 (pursuant to section 607.193, F.S.)  
THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$570.25 (\$437.50 + \$132.75).  
Note: If the amount entered in 5b is greater than amount entered in 5a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.  
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE

9. Name and Address of Current Registered Agent

JASLOW, CRAIG A ESQ  
8351 FONTAINEBLEAU BLVD., #B-307  
MIAMI FL 33172

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

City

FL

Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.1052, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s) and hereby accept the appointment of registered agent I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY  
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s)

11a. Address of Each General Partner  
(Do NOT Use Post Office Box Numbers)

11b. City, State & Zip Code

11c. Registration/  
Document Number

IAM HOLDINGS, INC.

2000 DOUGLAS ROAD, SU

CORAL GABLES FL 33134

F96000002304

**REINSTATEMENT.**

**96 -CM**

NOTE: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

By: **IAM Holdings Inc., General Partner**  
**Lane A. Jaslow, President**

SIGNATURE **Lane A. Jaslow**

DATE **5/2/96**

Telephone Number **(305) 446-1966**

CRJE003 (1/1/95)