

F0000000009/18
TRANSMITTAL LETTER

To: Registration Section
Division of Corporations

SUBJECT: ✓
(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:

500003115115--7
-01/28/00--01094--009
*****87.50 *****87.50

BRADIS RUIZ
(Name of Person)

PO Box 170805
(Firm/Company)

Miami, FL 33017-0805
(Address)
(City/State/Zip)

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

BRADIS RUIZ at (305) 875-8131
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Registration 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



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

February 2, 2000

BRAULIO RUIZ
P.O. BOX 170805
MIAMI, FL 33017-0805

SUBJECT: ATLAS COMPANIA DE SEGUROS, S.A.
Ref. Number: W00000002945

We have received your document for ATLAS COMPANIA DE SEGUROS, S.A. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

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) 487-6043.

Shawn Logan
Document Specialist

Letter Number: 000A00004953

RECEIVED
FEB 15 11 01 AM
SECRETARY OF STATE

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman:

Address:

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

B. OFFICERS

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.

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

14.

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

**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. ATLAS COMPAÑIA DE SEGUROS, S. A.

(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. Dominican Republic

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

3. RNC 101-06164-2

(FEI number, if applicable)

4. Dec 02, 1976

(Date of incorporation)

5. Perpetual

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

6. Upon Qualification

(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")

(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. a. Fantino Falco Edif. NACO 2000 Santo Domingo Dominican Rep

(Principal office address)

b. PO Box 170805 Miami FL 33017-0805

(Current mailing address)

8. Personal Accounting Operations

(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 or Mail Drop Box **NOT** acceptable)

Name:

Beaulio Luiz

Office Address:

PO Box 19540 West. St. Andrews Drive
Miami

, Florida

33015
(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.


(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.

DOMINICAN REPUBLIC
SECRETARY OF STATE OF FINANCE
GENERAL CHAMBER OF FINANCE TAXES

CERTIFICATION

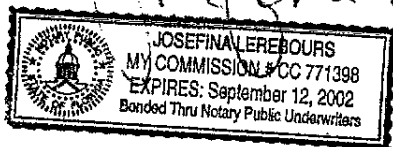
This General Chamber hereby certifies through this document that in the Files of the Registry Section of Corporations, there is one registered under No. C-3619-76, under the social name of SEGUROS LA ALIANZA, S.A., which on December 2, 1976, according to paragraph 4, added by the Law 5456 of December 23, 1960, Article 36 of the present Law of Succession and Donations No.2569 of December 4, 1950, authorization was issued for the purpose of depositing in the corresponding courts, through Law No.32650 on March 30, 1979, Law No.4538, June 11, 1984, Law No.10880, made the modifications of the law., March 25, 1992, Law 7807, Increasing Capital and Other Modifications, March 27, 1998, Law 14138, Change of name to: ATLAS COMPANIA DE SEGUROS, S.A. and other Modifications. Presently, such Company is in compliance with its requirement declaration of taxes and fiscal obligations, Folio RNC-1-01-06164-2.

The present certification is issued under the request of Mr. Raulio M. Ruiz.

Issued in Santo Domingo, D.N., City of the Dominican Republic , the seventh (7) day of December, year 1999.

Att. Juan Hernandez
General Director

I, Josefina Lerebours hereby certify this is a translation from a true original.





República Dominicana
SECRETARIA DE ESTADO DE FINANZAS
DIRECCION GENERAL DE IMPUESTOS INTERNOS

OR-SC

- 8 DIC 1999

053177

C E R T I F I C A C I O N

Esta Dirección General por medio del presente documento CERTIFICA que en los Archivos de la Sección Registro de Compañías de esta Dirección General, se encuentra registrada una sociedad marcada con el No.C-3619-76, que gira bajo la razón social de SEGUROS LA ALIANZA, S.A., a la cual en fecha 2 de Diciembre de 1976, conforme a lo que dispone el párrafo 4to. agregado por la Ley 5456 del 23 de diciembre de 1960, Art. 36 de la vigente Ley de Sucesiones y Donaciones No.2569 del 4 de diciembre de 1950, se le otorgó autorización para los fines de depósito en los Tribunales correspondientes, mediante Oficio No.32650 y en fecha 30 de Marzo de 1979, Oficio NO.4538, 11 de Junio de 1984, Oficio No.10880, realizó Modificación de Estatutos, 11 de Febrero de 1987, Oficio No.2339, Aumento de Capital, 15 de Junio de 1989, Oficio No.18539, Modificación de Estatutos, 25 de Marzo de 1992, Oficio No.7807, Aumento de Capital y Otras Modificaciones, 27 de Marzo de 1998, Oficio No.14138, Cambio de Nombre A:ATLAS COMPAÑIA DE SEGUROS, S.A. y Otras Modificaciones; en la actualidad dicha Compañía está cumpliendo con su deber formal de declaración y pagos de sus obligaciones fiscales, RNC-1-01-06164-2.

.....La presente Certificación se expide a solicitud del señor Braulio M. Ruiz.

.....Dado en Santo Domingo, D.N. Capital de la República Dominicana, a los (7) días del mes de Diciembre del año 1999.-

[Firma]
LIC. JUAN HERNANDEZ
Director General.

Sellos I.I.RD\$1.25
Cancelados: Sto. Dgo.
JHB/EPH/MT/AC/fdm.

