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4.

# TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Partners Specialty Group, 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:

Christine Boucher  
(Name of Person)

900003479609--5  
-11/29/00--01037--011  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

Partners Specialty Group, Inc.  
(Firm/Company)

1787 Sentry Parkway West, Bld. 18, Ste 450  
(Address)

Blue Bell, PA 19464  
(City/State and Zip code)

For further information concerning this matter, please call:

Christine Boucher at ( 215 ) - 542-7496  
(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

FILED  
00 NOV 29 AM 2:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

4mth  
12/4

**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. Partners Specialty Group, Inc.  
(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. ~~United States~~ PA 3. 23-3004103  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 5/99 5. \_\_\_\_\_  
(Date of incorporation) (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. 1787 Sentry Parkway West, Bld. 18, Suite 450, Blue Bell, PA 19464  
(Principal office address)  
PO Box 216, Blue Bell, PA 19464  
(Current mailing address)
8. Wholesale Brokerage Insurance  
(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: Carolyn McIntosh  
Office Address: 12212 153RD Ct. N.  
Jupiter, FL, Florida 33478  
(City) (Zip code)

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TALLAHASSEE, FLORIDA

**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.*

Carolyn McIntosh  
(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: Daniel P. McDonnell  
Address: 729 Willow Run Rd, Lower Gwynedd, PA 19002

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

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

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

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

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

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

B. OFFICERS

President: Daniel P. McDonnell  
Address: 729 Willow Run Rd, Lower Gwynedd, PA 19002

Vice President/Secretary - Jacqueline McDonnell  
Address: 729 Willow Run Rd, Lower Gwynedd, PA 19002

Asst. Secretary: Alan Sanders

Address: 233 S. 6<sup>th</sup> St., Apt. 1609, Philadelphia, PA 19106

Treasurer: Julie Van Scott

Address: 639 Fern Rd, Glenside, PA 19038

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

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

14. Daniel P. McDonnell, President  
(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

NOVEMBER 16, 2000

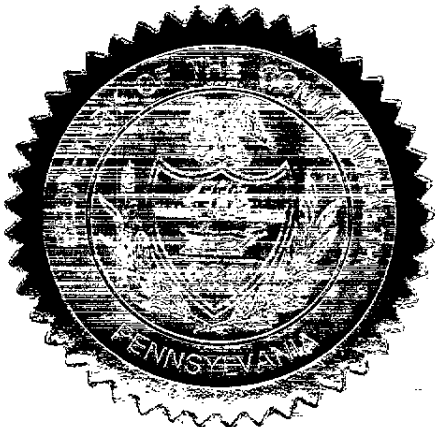
TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

PARTNERS SPECIALTY GROUP, INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania  
and remains a subsisting corporation so far as the records of this office  
show, as of the date herein.

FILED  
00 NOV 29 AM 2:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



IN TESTIMONY WHEREOF, I have  
hereunto set my hand and caused  
the Seal of the Secretary's  
Office to be affixed, the day  
and year above written.

*Kim Ditzgen*

Secretary of the Commonwealth

JSOW