
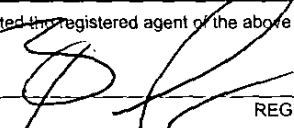



PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	FILED 03 OCT 29 AM 9:27 SECRETARY OF STATE TALLAHASSEE, FLORIDA		
DOCUMENT # F00000006982					
1. Corporation Name Starr Technical Risks Agency, Inc.					
2. Principal Office Address 70 Pine Street Suite, Apt. #, etc.		3. Mailing Office Address 70 Pine Street Suite, Apt. #, etc. 30th Floor		REINSTATEMENT 01-23 4. Date Incorporated or Qualified To Do Business in Florida 12-15-2000 5. FEI Number 13-5619563 <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable 6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$375 Additional Fee required for a Certificate of Status	
City & State New York, NY		City & State New York, NY			
Zip 10270	Country USA	Zip 10270	Country USA		
7. Name and Address of Current Registered Agent Name Corporation Service Company Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS Street Suite, Apt. #, Etc. 500024267605 City Tallahassee State FL Zip Code 32301					
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent  Brian Courtney Asst. V. Pres. REGISTERED AGENT MUST SIGN Date 10/29/03					
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director		City / State / Zip	
CEO	Thomas R. Tizzio	175 Water Street		New York, NY 10038	
CEO/PD	Richard N. Shnak	70 Pine Street		New York, NY 10270	
SVP	James R. Regan	500 W. Madison St.		Chicago, IL 60661	
VP/C	Kylie Wong	70 Pine Street		New York, NY 10270	
S	Elizabeth M. Tuck	70 Pine Street		New York, NY 10270	
T	Michael D. Warantz	70 Pine Street		New York, NY 10270	
10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.					
SIGNATURE:  Elizabeth M. Tuck - Secretary SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 10/20/03 Daytime Phone # (212) 770-7000					



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 293499 4320171

AUTHORIZATION :

Patricia Pizeto

COST LIMIT : \$ 1050.00

ORDER DATE : October 24, 2003

ORDER TIME : 4:14 PM

ORDER NO. : 293499-005

CUSTOMER NO: 4320171

CUSTOMER: Bernadette Colon
American International Group,
30th Floor, 70 Pine Street
- Corporate
New York, NY 10270

REINSTATEMENT

NAME: STARR TECHNICAL RISKS AGENCY,
INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight

EXAMINER'S INITIALS _____

RECEIVED
03 OCT 29 PM 4:47
DIVISION OF CORPORATION