F01000001111

TO:

Registration Section

TRANSMITTAL LETTER

Division of Corporations	•	•
SUBJECT: American I	n SURANCE Adminit f corporation - must include suffix)	strators, Inc
Dear Sir or Madam:		
The enclosed "Application by Foreign Corp "Certificate of Existence", and check are sulto transact business in Florida.		
Please return all correspondence concerning John R. Sor	this matter to the following: Rentino	1000036533213 -02/06/0101036006 *****87.50 *****87.50
Bertholon-Rowlan	(Name of Person) d Corp.	wal-3083
100 BROADWAY New YORK, N.Y.		
	(Address)	
New YORK N.Y.	10005	
(City/State and Zip code)	
For further information concerning this matter of Person)	•	OG TALLANDON FEB TO TO THE PROPERTY OF THE PRO
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	MAILING ADDRES Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 3231	TILED ARY OF STATE SCEEN FLORIDA 4
Enclosed is a check for the following amour	nt:	2/27
☐ \$70.00 Filing Fee ☐ \$78.75 Filing F Certificate of S	-	\$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 8, 2001

JOHN R. SORRENTINO 100 BROADWAY NEW YORK, NY 10005

SUBJECT: AMERICAN INSURANCE ADMINISTRATORS, INC.

Ref. Number: W0100003083

We have received your document for AMERICAN INSURANCE ADMINISTRATORS, INC. 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 adopted name AIA Insurance Agency is also not avaliable so therfore you would need to adopt another name.,

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) 487-6097.

Michael Mays Document Specialist

Letter Number: 101A00007872

RESOLUTION OF BOARD OF DIRECTORS (Please print or type)

i			
I, the undersigned John R.	Sorrentino,	do hereby certify	
that this Resolution of the Board of L	Name)	+ torus	
1		A INSURA	NEE
Administrators, In (Corpo	C .		
a corporation duly organized and exi		ate of Ohio	
٠	_	70 m /	
Be it resolved, that American	Tosupance Ag	minist a sa tox	s Inc
Be it resorved, that ////(CA/CA/	(Corporate Name)	mmjs (k W C-C	, , , , , , , , , , , , , , , , , , ,
organized and existing in the State of	f $Ch(o)$, he	ereby adopts the na	me
American Insurance	e Ohio Agenc	for use in Flo	rida.
	V /	1A.7 35 00	
Dated: 2 / 23/0/		IT VARA	
7/0	^ 1 - <i>1</i>		3 =
John	R Soventin		
Signature of either	Chairman, Vice Chairman or any o	fficer SS =	-
			ა •
John	R. Sorrent Type or print Name	INO	
	Type or print Name		
i' l	•		
INHS19(1/00)			

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.

. American Insurance Administrators 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. OH10 (State or country under the law of which it is incorporated) 3. 31-1258935 (FEI number, if applicable)
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. January 3 1989 (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. 3070 Riverside Orive Columbus Ohio 43221 (Principal office address) Same as above (Current mailing address)
(Principal office address)
Same as above
(Current mailing address)
8. To market and administer life and insurace and to generally conduct the busine (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) of and insurace administrator and agency s
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
9. Name and street address of Piorida registered agency
Name: CI CORPORATION JYSTEM
Name: CT Corporation System Office Address: 1200 South Pine Island Plantation , Florida 33324 (Zip code)
Plantation Florida 33324 SE 2 F
(City) (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 aer in this Supacity. 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.
DOMENIC BORRIELLO, ASST. SECY

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.

(Registered agent's signature)

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

هرماو ، _{در}ار

A. DIRECTORS
Chairman: ALAN ZINK
Address: AMERICAN INSURANCE Administrators Inc. 3070
Riverside Drive Columbus, Ohio 43221
Director: ARNOI B. Kaplan
Address: Bertholon-Rowland Corp., 100 BROADWAY, New YORK,
Director: Catherine Richardson
Address: Bond, Schoeneck + King LLP, One Lincoln Center,
18th Floor, Syracuse, New York 13203
Director: RENARD WRIGHT
Address: BERTHOLON-ROWLAND CORP., 100 BROADWAY New
YORK, New YORK 10005
B. OFFICERS
President: Alan Zink
Address: American Insurance Administrators, Inc. 3078
Riverside Drive Columbus Ohio 43231
A55 + Treasurer + Sy. Nancy Tiburzio American Insurance II
Address: Administrators, Inc. 100 BROADWAY 55 =
New YORK, New YORK 10005 \$ 3
Secretary: John R. Sorrentino Bertholon-Rowland Corp.
Address IDD BRADDINAY MAN YORK NY 10005
Address: 100 Broadway, New York, N.Y. 10005 Treasurer: ARNOL B. Kaplan, Bertholon-Rowland Corp., Address: 100 Broadway, New York, N.Y. 10005
Treasurer: HRIVOL D. Napian CERINOTON- NOVIGNA CORP.
Address: 100 Skomb WA7 1000 10kk 10.1. 10005
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. John R Soventino
13. John R Soventino (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 14. John R. Sorrentino Secretary (Typed or printed name and capacity of person signing application)
14. John K. Sorrentino Secretary
(Typed or printed name and capacity of person signing application)

UNITED STATES OF AMERICA, STATE OF OHIO, OFFICE OF THE SECRETARY OF STATE.

I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show AMERICAN INSURANCE ADMINISTRATORS, INC., an Ohio Corporation, Charter No. 739516, having its principal location in Columbus, County of Franklin, was incorporated on January 3rd, 1989 and is currently in GOOD STANDING upon the records of this office.

WITNESS my hand and official seal

at Columbus, Ohio on

November 30, 2000

GE CRETARY OF STATE O

J. Kenneth Blackwell

Secretary of State