## F010000 63/2

## TRANSMITTAL LETTER

|                              |   | ration Section on of Corporations  Hilb, Log  dam: | \and \and \and \and \and \and \and \and | tanilton Compation - must include suffi                      | pany of Six)                               | outhern   | New<br>Jeisty                     |  |
|------------------------------|---|--|---|--|--|---|-----------------------------------|--|
|                              | The enclosed "A<br>"Certificate of I<br>to transact busin | Existence", and ch                                 | eign Corporation<br>eck are submitted   | for Authorization to Trar<br>to register the above refe      | nsact Business in F<br>erenced foreign con | lorida",<br>poration                                  | ,                                 |  |
|                              | Please return al.   | l correspondence c                                 | Vanke                                   | atter to the following:                                      | 00000-12/1<br>-12/1                        | 17115:<br>%401010<br>******************************** | <b>300</b><br>47-014<br>****87.50 |  |
|                              | Hilly Rog   | ral and f  | anilton                                 | c of Person)  Company of  (Company)                          | -Souther                                   | New.  | Dersey                            |  |
|                              |   | Mt. Lan  | re/, N                                  | ddress)  3 8855  ate and Zip code)                           | 4  | TASE O  | <b>,</b> .                        |  |
|                              | Na  | rmation concerning  2// of Person)                 | g this matter, plea                     | • ,  | 2/<br>phone Number)                        | DEC -6 PM 3: 02 CRETARY OF STATE LAHASSEE, FLORIDA    | FILED                             |  |
| Name<br>Availabilit <b>y</b> | STREET ADDI   | 3  |   | MAILING ADDRE  |  |   |                                   |  |
| Document<br>Examiner         | Division of Corp<br>409 E. Gable St                       | oorations<br>t                                     |   | Registration Section<br>Division of Corpora<br>P.O. Box 6327 | tions                                      |   |                                   |  |
| Updater                      | Tallaliassee, FL  |  |   | Tallahassee, FL 323  | 314  |   |                                   |  |
| Updater<br>Verifyer          | Enclosed is a character of S70.00 Fifes                   | ck for the followi                                 | ng amount:<br>5 Filing Fee &            | ☐ \$78.75 Filing Fee &                                       | \$ \$ 27 50 E:1:                           | ng Too  |                                   |  |
| Acano dedg                   | ······································                    | I  | ficate of Status                        | Certified Copy   | Certificate                                | \$87.50 Filing Fee, Certificate of Status &           |                                   |  |
| V. P. Verify                 | /er DCC   | ,<br>  |   |  | Certified (                                | <b>Ј</b> ору  |                                   |  |

E0100000010312

## 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 FO     | OREIGN CORPORATIO  | N TO TRANSACT                            | TBUSINESS .                    | IN THE STA                            | TE OF FLORID                         | )A.                       |                  |             |
|-------------------|--|--|--------------------------------|---------------------------------------|--------------------------------------|---------------------------|------------------|-------------|
|                   | gal and Han  |  |                                |                                       |                                      |                           | <u> 504</u>      |             |
|                   | oration; must include the w<br>viations of like import in la |  |                                |                                       |                                      |                           |                  |             |
|                   | or partnership if not so con                                 |  |                                | it it is a corpor                     | anon instead of a                    | ·                         | /                |             |
| A                 | · · · · · · · · · · · · · · · · · · ·                        |  | F,                             | 4                                     |                                      |                           |                  |             |
| 2. <u>//</u>      | ew Jersey  |  | 3 <i>a</i>                     |                                       | 20614                                |                           |                  |             |
| (State or country | y under the law of which it                                  | is incorporated)                         |                                | FEI numb                              | er, if applicable)                   |                           |                  |             |
| 4                 | 7-30-59  |  | 5.                             | PPMP                                  | tral                                 |                           |                  |             |
| ''                | te of incorporation)   | <del></del>                              |                                | Year corp. wi                         | Il cease to exist o                  | r "nemetual               | <u>")</u>        |             |
| 11                | A 150  | , ,                                      | (                              | n our posps                           |                                      | . perpetual.              | . ,              |             |
| 6. <u>U</u>       | on Qualiz  | cation                                   |                                | <u> </u>                              |                                      |                           |                  |             |
| (Date first trans | acted business in Florida.                                   | If corporation has n<br>SECTIONS 607.150 | of fransacted b                | usiness in Flor                       | rida, insert "upon                   | qualification             | n.")             |             |
| 4                 | - 1 · (GLZ)  |  | 01, 007.1302 a                 | AA                                    | .3.)<br><i>i</i>                     | سِس، ر                    |                  | ~ ·         |
| 7. <u>/0/Ĵ</u>    | Brigge Ko  | L., PO 100                               | ×200.                          | 9, 111                                | - Laure                              | <u> </u>                  | _0               | 505 9       |
|                   |  | (Principal office ac                     |                                | /                                     | 4                                    | 7                         |                  | •           |
| 1015              | Briggs ld.   | . Po Box                                 | 5005                           | -M+                                   | Lawel,                               | NTO                       | 080              | 554         |
|                   |  | (Current mailing ac                      | idress)                        | · · · · · · · · · · · · · · · · · · · |                                      | - <del> </del>            |                  | - /         |
|                   |  | Δ  |                                |                                       | -                                    | JATI<br>IS                | 0                |             |
| · 7/              | SUID ACE   | Braker                                   |                                |                                       |                                      | E.C.                      |                  |             |
| (Purpose          | (s) of corporation authorize                                 | ed in home state or                      | country to be c                | arried out in s                       | tate of Florida)                     | <del></del>               |                  |             |
|                   |  |  |                                |                                       | ·                                    | AR                        | G                | <u> </u>    |
| 9. Name and st    | <u>reet address</u> of Florida                               | registered agent                         | : (P.O. Box                    | or Mail Drop                          | Box NOT acce                         | epta以                     | 77               | <u> </u>    |
| Name:             | Corporation Serv   | rice Company                             |                                |                                       |                                      | 77.7                      | ž                |             |
| maine:            | Oorporacton ber  | , acc company                            | <del></del>                    | -                                     |                                      | ,<br>C 24                 | ယ္               |             |
| Office Address:   | 1201 Hays Stree  | et                                       |                                |                                       |                                      | <u>ê</u> f                | 20               |             |
|                   |  |  |                                | ,                                     |                                      | ,5>                       | _                |             |
|                   | Tallahassee  |  | , Flor                         |                                       | <u>-</u>                             |                           |                  |             |
|                   | (City)   |  |                                | (Zip co                               | de)                                  |                           |                  |             |
| 10 D              | <b>49</b>  |  |                                |                                       |                                      |                           |                  |             |
|                   | agent's acceptance:<br>med as registered agent               | and to accent see                        | wica of proce                  | ess far tha ah                        | ova stated corn                      | avation at:               | tha ni           | 7.0.0       |
| designated in the | is application, I hereby                                     | ana to accept ser<br>accept the appoin   | vice oj proce<br>itment as reg | istered ageni                         | ove stateu corpo<br>t and agree to a | oraaon aa<br>ct in this c | ine pu<br>anacii | ice<br>v I  |
| further agree to  | comply with the provisi                                      | ons of all statutes                      | s relative to t                | he proper an                          | d complete peri                      | formance o                | of my            | <i>y.</i> 2 |
| duties, and I am  | familiar with and acce                                       | pt the obligations                       | of my position                 | on as register                        | red agent.                           |                           | , ,              |             |
|                   | 40   | ///                                      | /                              |                                       |                                      |                           |                  |             |
|                   |  | '////                                    |                                |                                       |                                      |                           |                  |             |
|                   | [ Why!   | / $a$ $<$                                |                                |                                       |                                      |                           |                  |             |
| -                 | - Comy   | (Registered agent's                      | signature)                     |                                       | <del></del>                          |                           |                  |             |
|                   |  | , -                                      | - ,                            |                                       |                                      |                           |                  |             |
| 11. Attached is a | a certificate of existence                                   | duly authenticate                        | d, not more t                  | han 90 days j                         | orior to delivery                    | of this app               | olicatio         | on 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: Please see Attached  A. DIRECTORS  List.   |
|---|
| A. DIRECTORS  |
| Chairman:   |
| Address:  |
|   |
| Vice Chairman:  |
| Address:  |
|   |
| Director:   |
| Address:  |
|   |
| Director:   |
| Address:  |
|   |
| B. OFFICERS   |
| President:  |
| Address:  |
| PAT 0   |
| Vice President:   |
| Address:  |
|   |
| Secretary:  |
| Address:  |
| Treasurer:  |
| Address:  |
| NOTE: If a second with the deal of the deal of the second |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.   |
| (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)   |
| 14. Carto, Timpanaro  |
| (Typed or printed name and capacity of person signing application)  |

## HILB, ROGAL AND HAMILTON COMPANY OF SOUTHERN NEW JERSEY

Carl J. Timpanaro, President 228 Longwood Avenue Chatham, NJ 07928 SSC: 158-44-9558

Christopher D. Carpino, Executive Vice President 12 Autumn Drive Moorestown, NJ 08057 SSC: 206-58-1762

Genarino M. Campanaro, Senior Vice President 1400 Endingo Avenue Williamstown, NJ 08094 SSC: 179-50-9901

Andrew L. Rogal, Vice President 9023 Norwick Road Richmond, VA 23229 SSC: 210-36-0439

Timothy J. Korman, Director & Vice President 11730 Hazelton Drive Richmond, VA 23236 SSC: 223-66-7303

Martin L. Vaughan, III, Director & Vice Chairman 3809 Rupert Lane Richmond, VA 23233 SSC: 264-82-2151

Robert B. Lockhart, Vice President 348 North Steele Road West Hartford, CT 06117 SSC: 150-38-5131 Robert H. Jenkins, Jr., Vice President 819 Laurel Street Delanco, NJ 08075 SSC: 152-28-4967

Christopher Stafford, Vice President 8530 Bryn Mawr Avenue Pennsauken, NJ 08109 SSC: 152-54-0048

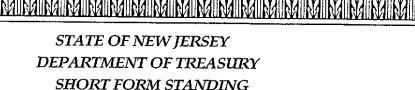
William G. Gramigna, Vice President 5816 Lexington Avenue Pennsauken, NJ 08109 SSC 143-58-9378

James A. Fitzpatrick, Assistant Vice President 1107 Augusta Circle Mt. Laurel, NJ 08054 SSC: 171-44-6624

Lu Ann Miller, Assistant Vice President 400 Franklin Avenue Northfield, NJ 08225 SSC: 200-36-6635

Carolyn Jones, Treasurer 4200 Bromley Lane Richmond, VA 23221 SSC: 231-66-8270

Walter L. Smith, Director & Secretary 12319 Countryview Drive Glen Allen, VA 23059 SSC: 231-64-1094



HILB, ROGAL AND HAMILTON COMPANY OF SOUTHERN NEW JERSEY

With the Previous or Alternate Name

MCCAY CORPORATION (FORMERLY JAMES E. MC CAY

AGENCY)

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on July 30, 1959.

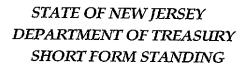
As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Corporation Service Company 830 Bear Tavern Rd West Trenton, NJ 08628

Continued on next page . . .

SECRETARY OF STATE
TALLAHASSEE. FLORIDA



HILB, ROGAL AND HAMILTON COMPANY OF SOUTHERN NEW JERSEY

With the Previous or Alternate Name

MCCAY CORPORATION (FORMERLY JAMES E. MC CAY

AGENCY)



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 26th day of September, 2001

Peter R Lawrance Acting State Treasurer