

**2006 FOR PROFIT CORPORATION REINSTATEMENT**

Page 1072  
**REINSTATEMENT 06**

**DOCUMENT # F03000000095**

1. Entity Name  
**USI COMPANIES INC.**



**FILED**

06 NOV 13 PM 4:22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
**281 TRESSER BLVD. 7TH FLOOR  
STAMFORD, CT 06901**

Mailing Address  
**281 TRESSER BLVD. 7TH FLOOR  
STAMFORD, CT 06901**



2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
**PO Box 591**  
Suite, Apt. #, etc.  
**X81**  
City & State  
**MILWAUKEE, WI**  
Zip Country  
**53209 USA**

09282006 REIN-P CR2E098 (11/05)

4. FEI Number  
**41-2068420**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324**

**7. Name and Address of New Registered Agent**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Kristine Heiberger* **Kristine Heiberger** **Assistant Secretary** **10/24/06**  
Signature, typed or printed name of registered agent and title if applicable. (NOT) DATE

**FILE NOW!!! FEE IS \$750.00**  
**After January 1, 2007, Fee will be \$900.00**

**10. OFFICERS AND DIRECTORS**

TITLE	CD	<input type="checkbox"/> Delete
NAME	MCLAUGHLIN, EDWIN J	
STREET ADDRESS	281 TRESSER BLVD. 7TH FLOOR	
CITY-ST-ZIP	STAMFORD, CT 06901	
TITLE	DP	<input checked="" type="checkbox"/> Delete
NAME	BERTASI, RICHARD S	
STREET ADDRESS	281 TRESSER BLVD. 7TH FLOOR	
CITY-ST-ZIP	STAMFORD, CT 06901	
TITLE	S	<input type="checkbox"/> Delete
NAME	CHAFFEE, ORISON Y	
STREET ADDRESS	281 TRESSER BLVD. 7TH FLOOR	
CITY-ST-ZIP	STAMFORD, CT 06901	
TITLE	CT	<input type="checkbox"/> Delete
NAME	CHAFFEE, ORISON Y	
STREET ADDRESS	281 TRESSER BLVD. 7TH FLOOR	
CITY-ST-ZIP	STAMFORD, CT 06901	
TITLE	CV	<input type="checkbox"/> Delete
NAME	WESTLEY, NICHOLAS J	
STREET ADDRESS	281 TRESSER BLVD. 7TH FLOOR	
CITY-ST-ZIP	STAMFORD, CT 06901	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MCLAUGHLIN, BARBARA A	
STREET ADDRESS	281 TRESSER BLVD. 7TH FLOOR	
CITY-ST-ZIP	STAMFORD, CT 06901	

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KOSTA POULPOULOS	
STREET ADDRESS	2315 YORK RD, SUITE 300, DAK	
CITY-ST-ZIP	BROOK, IL 60523	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JEROME OKARMA	
STREET ADDRESS	5757 N. GREEN BAY AVE X-81	
CITY-ST-ZIP	MILWAUKEE, WI 53209	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE *[Signature]* **9/28/06** **414.524.2674**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

**USI COMPANIES**

**OFFICERS**

EDWIN J. McLAUGHLIN  
KOSTA POULOPOULOS  
NICHOLAS J. WESTLEY  
ORISON Y. CHAFFEE

**TITLE**

CEO  
President  
Vice President  
Secretary & Treasurer

**ADDRESS**

Two Stamford Plaza, 281 Tresser Blvd, Stamford, CT 06901  
2215 York Road, suite 300, Oak Brook, IL 60523  
2215 York Road, suite 300, Oak Brook, IL 60523  
Two Stamford Plaza, 281 Tresser Blvd, Stamford, CT 06901

Delegated Authority  
STEVE JANOWSKI

Vice President & Tax Director

5757 N. Green Bay Ave., Milwaukee, WI 53209

**DIRECTORS**

JEROME D. OKARMA  
STEPHEN A. ROELL  
SEAN MAJOR

5757 N. Green Bay Ave., Milwaukee, WI 53209  
5757 N. Green Bay Ave., Milwaukee, WI 53209  
5757 N. Green Bay Ave., Milwaukee, WI 53209

9/22/2006