F0300006385

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer. DK Per Susun, talked to DK Per Susun, talked to Chris Joyce. The Certification Chris Joyce. The Certification Chris Joyce. The Certification offication is all offication is all the also wante address y He also wante address y He also wante address y Corporation Charge to address Corporation Charge to address Corporation Charge the
Office Use Only

Mr. 648



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TRANSMITTAL LETTER

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TO: Amendment Section Division of Corporations

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SUBJECT: ProBuilders Specialty Insurance Company, RRG	
(Name of corporation)	
DOCUMENT NUMBER: F03000006385	• ,
The enclosed Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Chris Joyce (Name of person)	Z .
(clane of persony	
NationsBuilders Insurance Services, Inc.	
(Name of firm/company)	
1607 Mission Dr Ste 203	
(Address)	
Solvang, CA 93463	
(City/state and zip code)	
For further information concerning this matter, please call:	
Chris Joyce at (805) 691-1670	
(Name of person) (Area code & daytime telephone number)	
Enclosed is a check for the following amount:	
\$35.00 Filing Fee \$43.75 Filing Fee & Certificate of Status \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)	_
Mailing Address: Amendment SectionStreet Address: Amendment SectionDivision of Corporations P.O. Box 6327Division of Corporations 409 E. Gaines Street Tallahassee, FL 32314	

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

F03000006385

(Document number of corporation (if known))

1 ProBuilders Specialty Insurance Company, RRG

(Name of corporation as it appears on the records of the Department of State)

2. Nevada (Incorporated under laws of) 3.12/26/03

(Date authorized to do business in Florida)

SECTION II (4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation?

5.

(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)	
7. If the amendment changes the jurisdiction of incorporation, indicate a	new jurisdiction.
District of Columbia (New jurisdiction)	
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	7 7 •+ (Date)
Mark Rosenberg (Typed or printed name of person signing)	Secretary (Title of person signing)



Government of the District of Columbia **Department of Insurance and Securities Regulation**



Lawrence H. Mirel Commissioner

Captive Insurance Division (CID)

RISK RETENTION GROUP STATE OF DOMICILE CERTIFICATION

To the State Insurance Department of _____ Florida_

It is herby certified that ProBuilders Specialty Insurance Company Risk Retention Group, DC License No. #RR014, is domiciled in the District of Columbia and meets all the financial requirements of a Risk Retention Group, Association Captive pursuant to the Captive Insurance Company Act of 2000 (D.C. Law 13-192) as of this date.

The minimum net worth required of the Risk Retention Group in this State as of this date is:

\$200,000.00 Capital 31-3908(a) Code Cite

\$300,000.00 Surplus _____31-3908(f) Code Cite

Please note any concerns regarding this Risk Retention Group:

Signature: Chief Financial Analyst – CID

June 8, 2004

Title:

Date: