

FD400000174

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(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W. H. Howard
88

1-7-08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Builders Insurance Company, Inc.
(Name of Corporation)

DOCUMENT NUMBER: F04000000174

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this
matter to the following:

Attn: Heather Ross

(Name of Person)

Risk Services

(Firm/Company)

2233 Wisconsin Avenue, N.W., Suite 310

(Address)

Washington, DC 20007

(City/State and Zip code)

For further information concerning this matter, please call:

Heather Ross at (202) 471-5944

(Name of Person)

(Area Code & Daytime Telephone Number)

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF
AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA**

Builders Insurance Company, Inc.

(Name of Corporation)

F0400000174

(Document Number of Corporation (if known))

Nevada

(Incorporated Under Laws of)

FILED
2008 JAN -2 PM 4:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address for the corporation:

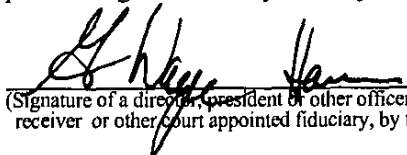
5430 W. Sahara Avenue

(Mailing Address)

Las Vegas, NV 89146

(City/ State /Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.


(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

12/14/07
(Date)

G. Wayne Harris

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE \$35

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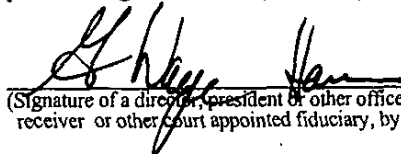
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12/14/07
(Date)

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(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE \$35



OFFICE OF INSURANCE REGULATION

FILED

DEC 5 2007

KEVIN M. McCARTY
COMMISSIONER

OFFICE OF
INSURANCE REGULATION
Sustained by: DLS

IN THE MATTER OF:

CASE NO.: 93132-07-CO

BUILDERS INSURANCE COMPANY, INC.
Surrender of Certificate of Authority

CONSENT ORDER

THIS CAUSE came on for consideration upon the agreement by BUILDERS INSURANCE COMPANY, INC. (hereinafter referred to as "BUILDERS") and the OFFICE OF INSURANCE REGULATION (hereinafter referred to as the "OFFICE") concerning the voluntary surrender of the Certificate of Authority issued by the OFFICE to BUILDERS, a foreign insurer pursuant to Sections 624.401, 624.415, 624.416 and 624.430, Florida Statutes. The OFFICE having considered said agreement and being otherwise fully advised in the premises, hereby finds, and BUILDERS agrees as follows:

1. The OFFICE has jurisdiction over BUILDERS and the subject matter of this proceeding.
2. BUILDERS is a foreign insurer domiciled in the State of Nevada authorized to transact insurance in the State of Florida, and subject to the jurisdiction and regulation of the OFFICE pursuant to the Florida Insurance Code.
3. BUILDERS was licensed on December 29, 2004 and was granted authority to write (0160) Workers Compensation in Consent Order Case No. 79092-04. However, the insurer

did not commence operations in this State, as is verified by the financial statements filings made by the insurer to the OFFICE.

4. BUILDERS notified the OFFICE by letter dated September 10, 2007, of its intent to surrender its Certificate of Authority issued by the OFFICE. Pursuant to Section 624.430(2), Florida Statutes, BUILDERS provided the OFFICE with complete notice of its intent to surrender its Certificate of Authority on October 24, 2007.

5. BUILDERS represents the following regarding its withdrawal and surrender of its Certificate of Authority from the OFFICE:

a. BUILDERS does not have any policies in force that are issued to residents of the State of Florida or that cover risks located in the State of Florida;

b. BUILDERS has not marketed or written any insurance business to date for residents in the State of Florida or risks located in the State of Florida;

c. BUILDERS does not have any policyholder liabilities outstanding pursuant to any policies outstanding in the State of Florida or risks located in the State of Florida; and

d. All transactions at BUILDERS that pertain to insurance business in the State of Florida have been limited to the payment of miscellaneous expenses and receipt of investment earnings.

6. Notwithstanding the representations enumerated above, BUILDERS or its successor shall honor all claims and liabilities arising under its contract obligations pursuant to policies issued to residents of the State of Florida. Moreover, BUILDERS specifically agrees that the OFFICE shall retain continuing jurisdiction over BUILDERS or its successor to enforce provisions of the Florida Insurance Code applicable to the satisfaction of past, current, or future

claims, liabilities or other obligations of BUILDERS that have arisen or may arise in the State of Florida.

7. BUILDERS or its successor agrees the OFFICE shall have continuing jurisdiction to enforce the requirements and provisions of this Consent Order, and that in the event that BUILDERS fails to comply with any provision of this Consent Order, the OFFICE may impose upon BUILDERS such administrative penalties or other appropriate remedies as authorized by the Florida Insurance Code.

8. Effective upon the date of execution of this Consent Order by the OFFICE the Certificate of Authority issued by the OFFICE to BUILDERS shall be surrendered and stand terminated, pursuant to Sections 624.416 and 624.430, Florida Statutes. BUILDERS voluntarily enters into this agreement with the OFFICE to surrender its Certificate of Authority and shall deliver its Certificate of Authority to the OFFICE within five (5) days of execution of this Consent Order.

10. BUILDERS expressly waives its rights to any hearing in this matter, the making of finding of fact and conclusions of law by the OFFICE, and all further and other proceedings to which it may be entitled by law or rules of the OFFICE. BUILDERS hereby knowingly and voluntarily waives all rights to challenge or to contest this Consent Order in any forum now or in the future available to it, including the right to any administrative proceeding, circuit or federal court action, or any appeal.

11. Each party to this action shall bear its own court costs and attorneys' fees.

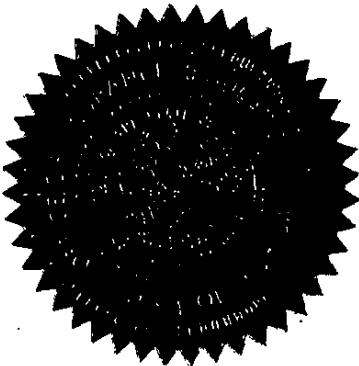
12. The parties agree that this Consent Order will be deemed executed when the agency head or his designee has signed a copy of this Consent Order bearing the signature of BUILDERS or its authorized representative, notwithstanding the fact that the copy was

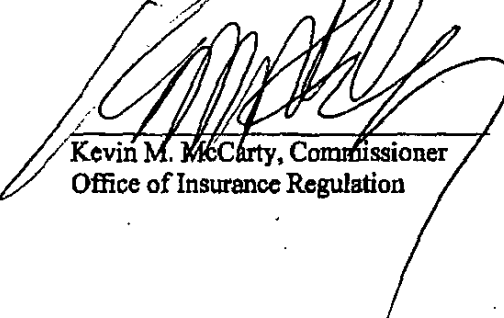
transmitted to the OFFICE by facsimile transmission or electronically. BUILDERS agrees that the signatures of its representative as affixed to this Consent Order shall be under the seal of a Notary Public.

WHEREFORE, the agreement between BUILDERS INSURANCE COMPANY and the OFFICE OF INSURANCE REGULATION, the terms and conditions of which are set forth above, is APPROVED.

FURTHER, all terms and conditions contained herein are hereby ORDERED.

DONE and ORDERED this 5th day of December, 2007.




Kevin M. McCarty, Commissioner
Office of Insurance Regulation

By execution hereof, BUILDERS INSURANCE COMPANY consents to entry of this Consent Order, agrees without reservation to all of the above terms and conditions and shall be bound by all provisions herein. The undersigned represents that he/she is authorized to bind BUILDERS INSURANCE COMPANY, to the terms and conditions of this Consent Order.

BUILDERS INSURANCE COMPANY INC.

By:

Print Name: G. Wayne Harris

Title: CEO President

Corporate Seal

STATE OF Florida
COUNTY OF Sarasota

The foregoing instrument was acknowledged before me this 3rd day of December 2007,
by G. Wayne Harris as President
(name of person) (type of authority e.g. officer, trustee attorney in fact)
for Builders Insurance Company, Inc.
(company name)

Susan J. Snedden
(Signature of the Notary)



(Print, Type or Stamp Commissioned Name of Notary)

Personally Known ☒ OR Produced Identification _____
Type of Identification Produced _____

COPIES FURNISHED TO:

Mr. G. Wayne Harris , President
Builders Insurance Company , Inc.
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(850)413-4175
zecchino-lukind@fldfs.com