

**FD4000001563**

Florida Department of State  
Division of Corporations  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## FOREIGN PROFIT QUALIFICATION

JLT Re Solutions, Inc.

Certificate of Status	0
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1,228.75

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DIVISION OF CORPORATIONS

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**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.*

1. JLT Re Solutions, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

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

2. Delaware 3. 22-2982631  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. June 14, 1989 5. perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. January 1, 2003  
(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. 1009 Lenox Drive, Building IV, Lawrenceville, NJ 08648  
(Principal office address)  
P.O. Box 6400, Lawrenceville, NJ 08648-0400  
(Current mailing address)

8. reinsurance brokerage  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324  
(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 act in this capacity. 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.*

C T Corporation System

By: Karla A. Schuering, Mkt. Sec.  
(Registered agent's signature)

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.

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

**A. DIRECTORS**

Chairman: Michael Brookman

Address: 200 Galleria Parkway, Suite 1820

Atlanta, GA 30339

Vice Chairman: Robert Kevin Cooney

Address: 1009 Lenox Drive, Building IV

Lawrenceville, NJ 08648

Director: John E. Januszewski, Jr.

Address: 1009 Lenox Drive, Building IV

Lawrenceville, NJ 08648

Director: Derek A. Wortman

Address: 8000 Norman Center Drive, Suite 620

Bloomington, MN 55437

**B. OFFICERS**

President: Robert Kevin Cooney

Address: 1009 Lenox Drive, Building IV

Lawrenceville, NJ 08648

Vice President: Derek Wortman

Address: 8000 Norman Center Drive, Suite 620

Bloomington, MN 55437

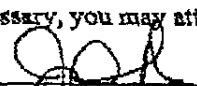
Secretary: Jay Scarborough

Address: 13 Cornell Road, Latham, NY 12110

Treasurer: John E. Januszewski, Jr.

Address: 1009 Lenox Drive, Building IV, Lawrenceville, NJ 08648

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.   
(Signature of Director or Officer listed in number 12 of the application)

14. Jay Scarborough, Secretary  
(Typed or printed name and capacity of person signing application)

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CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

# Delaware

PAGE 1

*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "JLT RE SOLUTIONS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF MARCH, A.D. 2004.

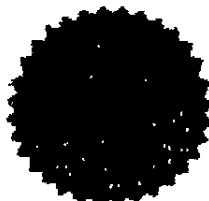
AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State

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AUTHENTICATION: 2999449

040205108

DATE: 03-19-04