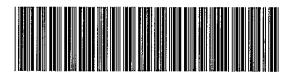
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ACCOUNT NO. : 07210000032

REFERENCE: 809141

7336436

AUTHORIZATION

COST LIMIT

ORDER DATE: July 16, 2004

ORDER TIME: 10:47 AM

ORDER NO. : 809141-005

CUSTOMER NO: 7336436

CUSTOMER: Ms. Lori A. Oleson

Nonprofit Protector

Suite 1300

222 South Ninth Street Minneapolis, MN 55402

FOREIGN FILINGS

NAME:

RIVERPORT INSURANCE

COMPANY

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY ___ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward -- EXT# 2935

EXAMINER: _ ____

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBM REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA 1 Riverport Insurance Company (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION." "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 2. Minnesota (State or country under the law of which it is incorporated) (FEI number, if applicable) (Duration: Year corp. will cease to exist or "perpetual") (Date of incorporation) 6. This submission is a name change. **See attachment** (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7 222 South Ninth Street, Suite 1300, Minneapolis, MN 55402 (Principal office address) 222 South Ninth Street, Suite 1300, Minneapolis, MN 55402 (Current mailing address) 8 Property and casualty insurer. (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 NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee (City)

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.

(Registered agent's signature)

Vivien S. Mitchell, Assistant Vice President

- 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: N/A Address: __ Vice Chairman: N/A Address: __ Director: Eugene C. Ballard Address: 475 Steamboat Road Greenwich, CT 06830 Director: Ira S. Lederman Address: 475 Steamboat Road Greenwich, CT 06830 * See Addendum **B. OFFICERS** President: Kenneth R. Hopkins Address: 222 South Ninth Street, Suite 1300 Minneapolis, MN 55402 Vice President: David S. Kyllo Address: 222 South Ninth Street, Suite 1300 Minneapolis, MN 55402 Secretary: <u>David S. Kyllo</u> Address: 222 South Ninth Street, Suite 1300, Minneapolis, MN 55402 Michael T. Elsenpeter Treasurer: Address: 222 South Ninth Street, Suite 1300, Minneapolis, MN 55402 NOTE: If necessary, you may be tagh an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) 14. David S. Kyllo, Secretary

(Typed or printed name and capacity of person signing application)

Attachment - Item 6.

This organization has existed since 1989 under the name Nonprofits Insurance Association, an Interinsurance Exchange. On May 1, 2002, it reorganized and changed its name to Nonprofits Insurance Company. Prior to May 1, 2002, it was registered with the Florida Department of Insurance and authorized to conduct insurance business in the state of Florida.

Addendum

12. Names and Addresses of Additional Directors

Robert C. Hewitt 475 Steamboat Road Greenwich, CT 06830

Mark C. Tansey 222 South Ninth Street, Suite 1300 Minneapolis, MN 55402

Kenneth R. Hopkins 222 South Ninth Street, Suite 1300 Minneapolis, MN 55402

state of Minnesota

SECRETARY OF STATE

Certificate of Good Standing

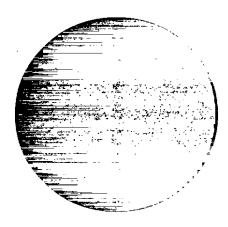
I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: Riverport Insurance Company

Date Formed: 04/30/2002

Chapter Governed By: 300

This certificate has been issued on 07/21/04.



Mary Hiffmeyer Secretary of State.