Division of Corporations

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : 120000000195 Phone : (850)521-1000

Fax Number : (850)558-1575

FOREIGN PROFIT QUALIFICATION

RICAN E & S INSURANCE BROKERS CALIFORNIA, INC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$70.00 |

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FAX:850 558 1515 FAX NO. 2175444657

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, PLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF PLORIDA.

| 1. | Amorican E | & S Insurance Brokers Californ | įİ | a, Inc. | | |
|----|---|---|----------|---|------------|--|
| | | corporation; must include "INCORPORATEL! Corp.," "Inc.," "Co," or "Corp.") |), ' | "COMPANY," "CORPORATION," | | |
| | | | | | | |
| | <u>-</u> . | ilablo in Florida, cater alternate corporate num | | • • • • | injticni į | n Florida) |
| 2. | California | | | 94-3137400 | | |
| | (State or country | y under the law of which it is incorporated) | | (FEI number, if applicat | ·[a] | |
| 4. | 4-22-1991 | 5 | | perpetual | | |
| | | e al'incorporation) | | (Duration: Year corp. will coase to exist | st or "pu | rpetual") |
| 6 | upon filln | ng | | | | |
| Ψ. | , <u>, , , , , , , , , , , , , , , , , , </u> | (Date first transacted business | in L5 | Florida, if prior to registration) 02, F.S., to determine penalty liability) | | ************************************** |
| 7. | lol Califor | nia Stroot, Suite 1125, San Fra | | ciaco, CA 94111 | | |
| ĺ | | (Principal office add | ď; | cs5) | : | |
| | samo as abo | ove | | | | 17 |
| | | (Current mailing add | đ٢ | CHS) | | |
| | | | | | <u>.</u> . | 4. |
| 8. | insurance : | edetica | | | <u>(</u> | 1 A THUS |
| | (Isuthoga) | s) of corporation authorized in home state or o | O | intry to be carried out in state of Florida |) (| . 2 |
| 9, | Name and sire | of address of Florida registered agent: (P.C | Ο. | Box NOT accordable) | هسك | |
| | | | | | | |
| | Nanio: | Corporation Service Company | | | | |
| 0(| Ticc Address; | 1201 Hays Street | | | | |
| | | Tallahassee | | Florida 32301 | | |
| | | (City) | _ | (Zip codo) | | |
| | | _ | | | | |

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 fundior with and accept the obligations of my position as registered agent.

Ey: (Sugistered 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 husiness addresses of officers and/or directors:

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| A, DIRECTORS Chairman: Kevin W. Conboy | |
|---|------|
| Address: 150 N. Michigan Avenue, Suite 4100, Chicago, IL 50501 | |
| Vice Clinianna: | |
| Address: | |
| Director: Robert M. Graco | |
| Address: 150 N. Michigan Avenue, Suite 4100, Chicago, IL 60601 | |
| Director: Robert P. Curhbert | |
| Address: 150 N. Michigan Avenue, Suite 4100, Chicago, IL 60601 | |
| B. OFFICERS Provident: Donie Brody | 1- 5 |
| Address: 101 California Street, Suite 1125, San Francisco, CA 94111 | - |
| Vice President: Maryanne Mayeda | |
| Address: 2603 Main Street, #800, Trine, CA 92614 | |
| Secretary: Robert M. Greco | |
| Address: 150 N. Michigan Avenue, Suite 4100, Chicago, IL 60601 | |
| Treasurer: Christine M. Ostermeier | |
| Address: 150 N. Michigan Avenue, Suize 4100, Chicago, IL 60601 | |
| NOTE: If necessary, you may attach an addendum to the application listing additional office is. (Signature of Director or Officer listed in number 12 of the application | |
| 14. Robert M. Greco, Sceretary | |
| (Typed or printed name and capacity of person signing application) | |

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State of California Secretary of State

CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, BRUCE McPHERSON, Secretary of State of the State of California, hereby certify:

That on the 22nd day of April, 1991, AMERICAN E & S INSURANCE BROKERS CALIFORNIA, INC. became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of May 16, 2005.



BRUCE McPHERSON Secretary of State

ts

State of California Secretary of State

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