

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
09 OCT 15 AM 6:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # *FL05 00000 4490*

1. Corporation Name

A.I. Risk Specialists Insurance, Inc.

2. Principal Office Address - No P.O. Box

100 Summer Street

3. Mailing Office Address

175 Water Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

18th Floor

City & State

Boston, MA

City & State

New York, NY

Zip

02110

Country

USA

Zip

10038

Country

USA

CR2E081 (12/08)

4. Date Incorporated or Qualified
To Do Business in Florida 8/3/055. FEI Number
13-4125003

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)

1201 Hays Street

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301

☐ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of

Registered Agent

Sue G. Knight
as its agent

Date

10-15-08

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
	Please see attachment.		

REINSTATEMENT**RH**

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S. that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/14/09

212-458-7452

Daytime Phone #

Directors/Officers Report

As of October 14, 2009

A. Risk Specialists Insurance, Inc.**Directors****Nicholas Edward Anselmo***Director*Primary Address

Lexington Insurance Company
100 Summer Street
Boston, Massachusetts 02110 (United States)

Peter James Eastwood*Director*Primary Address

Lexington Insurance Company
100 Summer Street
Boston, Massachusetts 02110 (United States)

Matthew F. Power*Director*Primary Address

Lexington Insurance Company
100 Summer Street
Boston, Massachusetts 02110 (United States)

Officers**Matthew F. Power***President*Primary Address

Lexington Insurance Company
100 Summer Street
Boston, Massachusetts 02110 (United States)

Directors/Officers Report

As of October 14, 2009

A.J. Risk Specialists Insurance, Inc.

Nicholas Edward Anselmo

Executive Vice President

Primary Address

Lexington Insurance Company
100 Summer Street
Boston, Massachusetts 02110 (United States)

Jodi Cotter

Senior Vice President

Primary Address

Western Risk Specialists, Inc.
777 South Figueroa Street
Los Angeles, California 90017-5814 (United States)

Stephen Joel Paris

Senior Vice President

Primary Address

Lexington Insurance Company
100 Summer Street
Boston, Massachusetts 02110 (United States)

Armand George Pepin

Senior Vice President

Primary Address

Connell Corporate Center 1
Connell Drive
Suite 2100
Berkeley Heights, New Jersey 07922 (United States)

Directors/Officers Report

As of October 14, 2009

A. L. Risk Specialists Insurance, Inc.**Daniel L. Haskell*****Vice President***Primary Address

100 Summer Street
Floor 30
Boston, Massachusetts 02110 (United States)

Patricia V. Craig***Assistant Vice President***Primary Address

Audubon Indemnity Company
4150 South Sherwood Forest Boulevard
Baton Rouge, Louisiana 70816 (United States)

Melissa U. Meserve***Assistant Vice President***Primary Address

100 Summer Street
Boston, Massachusetts 02110 (United States)

Kevin Robert Miller***Assistant Vice President***Primary Address

American International Entertainment, Inc.
100 Summer Street
Boston, Massachusetts 02109 (United States)

Victoria L. Webb***Assistant Vice President***Primary Address

American International Group, Inc.
100 Summer Street

Directors/Officers Report

As of October 14, 2009

A.I. Risk Specialists Insurance, Inc.

Boston, Massachusetts 02109 (United States)

Stephen Joel Paris

General Counsel

Primary Address

Lexington Insurance Company
100 Summer Street
Boston, Massachusetts 02110 (United States)

Tanya E. George

Clerk

Primary Address

175 Water Street, 18th Floor
New York, New York 10038 (United States)

Stephen John Andrick

Assistant Clerk

Primary Address

Lexington Insurance Company
100 Summer Street
Boston, Massachusetts 02110 (United States)

Denis M. Butkovic

Assistant Clerk

Primary Address

175 Water Street
18th Floor
New York, New York 10038 (United States)

Directors/Officers Report

As of October 14, 2009

A.I. Risk Specialists Insurance, Inc.

John Mathew Artesani

Treasurer

Primary Address

Lexington Insurance Company
100 Summer Street
Boston, Massachusetts 02110 (United States)

Comptroller

Primary Address

Lexington Insurance Company
100 Summer Street
Boston, Massachusetts 02110 (United States)

Florida Department of State
Division of Corporations
Public Access System

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To:

Division of Corporations
Fax Number : (850) 617-6384

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850) 521-1000
Fax Number : (850) 558-1575

CORPORATION REINSTATEMENT

A.I. RISK SPECIALISTS INSURANCE, INC.

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Electronic Filing Menu

Corporate Filing Menu

Help

RH