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	CECRETARY OF STATE
(Requestor's Nar	me)
(Address)	
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, ,	}
(City/State/Zip/Pi	hone #)
PICK-UP WAIT	MAIL
(Business Entity	Name)
(Document Num	ber)
Certified Copies Certific	cates of Status
Special Instructions to Filing Officer	
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SECRETARY OF	IF S	747	£

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TO:	Registration Section						SFC	oci-Fi.	. 7: 1
	Division of Corporation	5					IALLA	A PROYECT	STATE
CTIDY	rot.	Patriot Ris	k Servic	es Inc				** 6. 2. 6. 4. 4	e onig,
SUBJ	ECI:	(Name of co	· · · · ·		includ	le suffix	<u>; </u>		<u> </u>
		(1/4110-01-00	. poracio		morac	o samp	,		
Dear S	ir or Madam:								
"Certif	closed "Application by Forestee of Existence," and cost business in Florida.								
Please	return all correspondence	concerning this	s matter	to the fo	llowin	ıg:			
Kimber	ly D. Davis	· · · · · · · · · · · · · · · · · · ·	. <u>-</u>	_:`					, , .
		(1)		Person)		<u> </u>			
Patriot	Risk Services, Inc.		_	,		.:		•	
		(F	irm/Co	mpany)		<u></u>	<u> </u>		 ·
503 SE	Eaton Street								
703.50	Laton Street	<u></u>	(Addr	ess)			- <u> </u>		<u> </u>
~ .	W AD GOGLA		(4	,					
Benton	ville, AR 72712	<u></u>		<u> </u>	<u> </u>		<u></u>	· - /··-	٠ ــــــ
		(City	y/State a	and Zip c	ode)				
For fur	ther information concerni	ng this matter,	please c	all:					
	Kimberly D. Davis	at (479	273-1	529				
	(Name of Person)	at (_				e Telep	hone Numbe	er)	
	STREET/COURIER A	DDRESS:			MAI	LING A	ADDRESS:		
	Registration Section					stration			
	Division of Corporations	5					Corporations		
	Clifton Building						27		
	2661 Executive Center C Tallahassee, FL 32301	Circle			Talla	hassee,	FL 32314		
T1	-								
Enclos	ed is a check for the follow	wing amount:						-	
□ \$70		.75 Filing Fee & ctificate of State		\$78.75 Certifie			Certi	0 Filing Fed ficate of Stated fied Copy	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1.	PATRIOT RISK SERVICE	CES, INC.	4
(Enter name of c	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	o, "Company," "Corporation," Configuration, "Corporation," Configuration, "Corporation," Corporation, "Corporation," C	1
(If name unavail	able in Florida, enter alternate corporate nam	e adopted for the purpose of transacting business in Florida)	
2. Delaware	3	20-3377189	
	under the law of which it is incorporated)	(FEI number, if applicable)	The state of the s
4. June 10, 2005		Perpetual	
	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	·
6	(SEE SECTIONS 607.1501 & 607.	in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	en e
7. 43 Sky Line Driv	ve, Suite 2020, Lake Mary, Florida 32746 (Principal office ac	(deace)	ار مهر خالایت را
	` •	idicss)	
43 Sky Line Driv	e, Suite 2020, Lake Mary, Florida 32746 (Current mailing a	idress)	in the contract of
	· · · · · · · · · · · · · · · · · · ·	on may be organized under General Corporation Law of DE.	e to the second
(Purpose(s	s) of corporation authorized in home state or	country to be carried out in state of Florida)	
9. Name and stree	et address of Florida registered agent: (P	.O. Box NOT acceptable)	
3 .Y	CT Companying Systems		
Name:	C T Corporation System	The second secon	and the second second
Office Address:	1200 South Pine Island Road	· · · · · · · · · · · · · · · · · · ·	
	Plantation	, Florida 33324	
	(City)	(Zip code)	; = ·
Having been nam designated in this further agree to c	application, I hereby accept the appoin	vice of process for the above stated corporation at the p tment as registered agent and agree to act in this capad relative to the proper and complete performance of m position as registered agent.	city. I
	C.T. Co	tion System	

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.

(Registered agent's signature)

JOAN BOLDEN

ASSISTANT SECRETARY

By:

12. Names and business addresses of officers and/or director	rs:
A. DIRECTORS	
Chairman: See Attachment.	LED
Address:	Zills por
	P3
Vice Chairman:	WALLAFT STATE
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: See Attachment.	
Address:	
Vice President:	
Secretary:	<u> </u>
Address:	
Treasurer:	
Address:	
NOTE: If recessary you may attach an addendum to the ap	plication listing additional officers and/or directors.
13. (Signature of Director or Officer listed	Lin number 12 of the application
(Signature of Director of Officer fisted	in number 12 of the appreation)

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

PATRIOT RISK SERVICES, INC.

FILED

Directors

TITLE	<u>NAME</u>	BUSINESS ADDRESS
Chairman of the Board	Steven M. Mariano	TALLAHASSTATE 43 Sky Line Drive, Suite 2020, Lake Mary, FL 32746FL ORIDA
Director	Steven M. Beeghly	999 Third Avenue, Suite 3700, Seattle, WA 98104
Director	John R. Del Pizzo	90 South Newtown Street Road, Suite 3 Newtown Square, PA 19073
Director	Steven F. Herrig	7560 Commerce Court, Sarasota, FL 34243
Director	Fred G. Marziano	208 Second Avenue, Belmar, NJ 07719
Director	Nathan S. Ward	180 Royal Palm Way, Palm Beach, FL 33480

Executive Officers

TITLE	NAME	BUSINESS ADDRESS
President	Eric M. Halter	1061 521 Corporate Center Dr., Ste. 140, Fort Mill, SC 29715
Executive Vice President, Chief Legal Officer and Secretary	Marvin J. Cashion	43 Sky Line Drive, Suite 2020, Lake Mary, FL 32746
Treasurer	Crystal Climer	1061 521 Corporate Center Dr., Ste. 140, Fort Mill, SC 29715
Chairman of the Board	Steven M. Mariano	43 Sky Line Drive, Suite 2020, Lake Mary, FL 32746

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PATRIOT RISK SERVICES, 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 SEPTEMBER, A.D. 2005.



Darriet Smith Windson, Secretary of State

AUTHENTICATION: 4165903

DATE: 09-19-05