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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

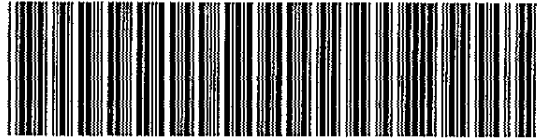
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SP

**ASSET PROTECTION PROGRAM, INC.,
RISK RETENTION GROUP**

February 24, 2006

Ms. Suzanne Hawkes
Document Specialist
Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

RE: Asset Protection Risk Retention Group, Inc.
Ref. Number W06000007323

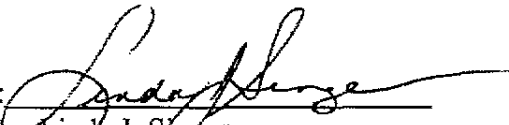
Dear Ms. Hawkes:

Enclosed is the response to Question 12 as part of the Application by Foreign Corporation for Authorization to Transact Business in Florida, amended and signed as requested on February 15, 2006.

We hope this will complete the filing process for the above-referenced company. Should you have any questions or need additional information, please feel free to contact me at 720-747-6007 or at the address listed below.

Sincerely,

**Asset Protection Program
Risk Retention Group, Inc.**

By: 
Linda J. Singer

2675 South Abilene Street, Aurora, Colorado 80014
Telephone: (720) 747-6007 • Fax: (303) 368-0529 • Email: lsinger@2-10.com



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 15, 2006

MR. GAVIN FOGGON
MEETING STREET MANAGEMENT COMPANY, LLC
200 MEETING STREET SUITE 403
CHARLESTON, SC 29401

SUBJECT: ASSET PROTECTION PROGRAM RISK RETENTION GROUP
Ref. Number: W06000007323

We have received your document for ASSET PROTECTION PROGRAM RISK RETENTION GROUP and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Suzanne Hawkes
Document Specialist

Letter Number: 906A00010883

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Asset Protection Program Risk Retention Group, INC.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Mr. Gavin Foggon
(Name of Person)
Meeting Street Management Company, LLC
(Firm/Company)
200 Meeting Street, Suite 403
(Address)
Charleston, SC 29401
(City/State and Zip code)

For further information concerning this matter, please call:

Linda Singer at (720) 747-6007
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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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 SEE, FLORIDA

1. Asset Protection Program Risk Retention Group, INC.

(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. South Carolina 3. 59-3789096
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11/19/2004 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Has not yet begun transacting business.
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. c/o Meeting Street Management CO. LLC, 200 Meeting Street, Ste. 403, Charleston, SC 2940
(Principal office address)

Same as above
(Current mailing address)

8. Industrial Insured Captive (Stock) (Contractors' General Liability)
(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)

Name: Chief Financial Officer, State of Florida

Office Address: 200 E. Gaines Street

Tallahassee, Florida 32399
(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.

Risk Retention Group - Florida Statutory Requirement

(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:

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Application by Foreign Corporation for Authorization to Transact Business in Florida
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
Asset Protection Program Risk Retention Group, Inc.

Question 12.

Name	Address
Bruce Harrell Director, President, Vice President	4501 Circle 75 Pkwy, NW, Suite F-6200 Atlanta, GA 30339
Randy Roppelt Director Secretary/Treasurer	100 Merrick Road, Ste 526W Rockville Centre, NY 11570
Michael Molony Director	c/o Young Clements Rivers Tisdale, LLP 28 Broad Street Charleston, SC 29401

By: _____

Bruce Harrell, President

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

ASSET PROTECTION PROGRAM RISK RETENTION GROUP, INC., a corporation duly organized under the laws of the State of South Carolina on July 24th, 2003, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the Corporation that it is subject to being dissolved by administrative action pursuant to section 33-14-210 of the South Carolina Code, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great
Seal of the State of South Carolina this
27th day of January, 2006.


Mark Hammond, Secretary of State