

F06000000 1623

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

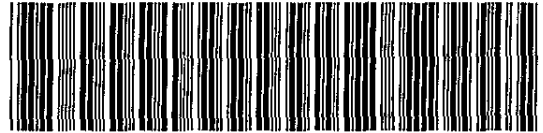
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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11/14/06--01064--020 \*\*70.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 MAR 13 PM 3:37

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Direct Line: 617-832-1478  
Email: [pbrylinsky@Homesite.com](mailto:pbrylinsky@Homesite.com)

VIA UPS NEXT DAY AIR

March 13, 2006

Florida Department of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Cir.  
Tallahassee, FL 32301

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09 MAR 13 PM 3:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Re: Homesite Insurance Agency, Inc.  
FEI #: 23-3011415

Dear Sir/Madam:

Per my letter dated March 6, 2006 (copy enclosed), enclosed please find the original and one copy of an Application by Foreign Corporation for Authorization to Transact Business in Florida, along with the required Good Standing Certificate and a check in the amount of \$70.00 to cover the filing fee.

Please process this Application in your usual manner and return the date-stamped copy to me for the Company's records.

Do not hesitate to contact me should you have any questions or require additional information.

Sincerely,

Patricia R. Brylinsky  
Corporate Paralegal  
Homesite Insurance

Enclosures

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Homesite Insurance Agency, 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:

Patricia R. Brylinsky  
(Name of Person)  
Homesite Insurance Agency, Inc.  
(Firm/Company)  
99 Bedford Street  
(Address)  
Boston, MA 02111  
(City/State and Zip code)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Patricia Brylinsky at ( 617 ) 832-1478  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing 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

**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.

1. Homesite Insurance Agency, 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. Massachusetts 3. 23-3011415  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 1/15/03 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. n/a  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 99 Bedford Street, Boston, MA 02111  
(Principal office address)

99 Bedford Street, Boston, MA 02111  
(Current mailing address)

8. insurance agency authorized to transact property and casualty insurance  
(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: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324  
(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.*

Kurtai Berger  
(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.

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TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Director  
Chairman: Fabian J. Fondriest  
Address: 99 Bedford Street  
Boston, MA 02111

Director  
Vice Chairman: Douglas A. Batting  
Address: 99 Bedford Street  
Boston, MA 02111

Director: James T. Morahan, Jr.  
Address: 99 Bedford Street  
Boston, MA 02111

Director: Anthony M. Scavongelli  
Address: 99 Bedford Street  
Boston, MA 02111

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STATE OF FLORIDA  
TALLAHASSEE

B. OFFICERS

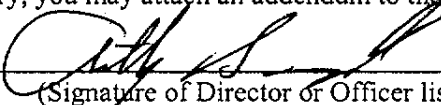
President: Douglas A. Batting  
Address: 99 Bedford Street  
Boston, MA 02111

Vice President: Peter B. Settel  
Address: 99 Bedford Street  
Boston, MA 02111

Secretary: Anthony M. Scavongelli  
Address: 99 Bedford Street Boston, MA 02111

Treasurer: James T. Morahan, Jr.  
Address: 99 Bedford Street Boston, MA 02111 (see attached)

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.   
(Signature of Director or Officer listed in number 12 of the application)

14. Anthony M. Scavongelli  
(Typed or printed name and capacity of person signing application)

Homesite Insurance Agency, Inc.

Schedule of Additional Officers

Anthony M. Scavongelli, Vice President  
99 Bedford Street  
Boston MA 02111

Stephen B. Stayton, Vice President  
99 Bedford Street  
Boston MA 02111

James T. Morahan, Jr., Vice President  
99 Bedford Street  
Boston MA 02111

Manuel Z. Rios, Vice President  
99 Bedford Street  
Boston MA 02111

Bennett C. Verniero, Vice President  
99 Bedford Street  
Boston MA 02111

Brendan G. Voss, Vice President  
99 Bedford Street  
Boston MA 02111

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



William Francis Galvin  
Secretary of the  
Commonwealth

*The Commonwealth of Massachusetts*

*Secretary of the Commonwealth*

*State House, Boston, Massachusetts 02133*

**March 10, 2006**

TO WHOM IT MAY CONCERN:

I hereby certify that according to the records of this office,

**HOMESITE INSURANCE AGENCY, INC.**

is a domestic corporation organized on **January 15, 2003**, under the General Laws of the Commonwealth of Massachusetts.

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

In testimony of which,  
I have hereunto affixed the  
Great Seal of the Commonwealth  
on the date first above written.

*William Francis Galvin*

Secretary of the Commonwealth

