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Florida Department of State
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FOREIGN PROFIT/NONPROFIT CORPORATION

Securian Casualty Company

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MRB 10/30

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. Securian Casualty Company

(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. Minnesota

(State or country under the law of which it is incorporated)

3. 41-1741988

(FBI number, if applicable)

4. January 18, 1994

(Date of incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. The company has not transacted business in Florida.

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

7. 400 Robert Street North, Saint Paul, MN 55101

(Principal office address)

400 Robert Street North, Saint Paul, MN 55101

(Current mailing address)

8. A property and casualty insurance company.

(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

(City)

Florida

33324

(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.

By: CT Corporation System
Michele Miller
(Registered agent's signature)

Michele Miller
Assistant Secretary

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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A. DIRECTORSChairman: Robert L. SenklerAddress: 400 Robert Street North, Saint Paul, MN 55101

Vice Chairman: _____

Address: _____

Director: Dennis E. Prohofsky, Gregory S. Strong, Jean Delaney Nelson, Paul W. Anderson, Warren J. Zaccaro, Betty N. Brost all atAddress: 400 Robert Street North, Saint Paul, MN 55101

Director: _____

Address: _____

B. OFFICERSPresident: Paul W. AndersonAddress: 400 Robert Street North, Saint Paul, MN 55101Vice President: Betty N. BrostAddress: 400 Robert Street North, Saint Paul, MN 55101Secretary: Dennis E. ProhofskyAddress: 400 Robert Street North, Saint Paul, MN 55101Treasurer: David J. LaPlavyAddress: 400 Robert Street North, Saint Paul, MN 55101**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. Betty N. Brost, Vice President

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

State of Minnesota

SECRETARY OF STATE

Certificate of Good Standing

I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: Securian Casualty Company

Date Formed: 01/18/1994

Chapter Governed By: 302A

This certificate has been issued on 10/26/06.

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TALLAHASSEE, FLORIDA



Mary Kiffmeyer
Secretary of State.