

906000007/09

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

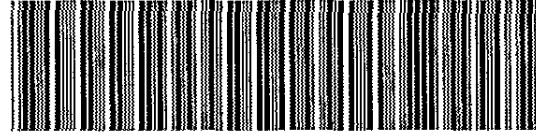
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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10/26/06--01041--002 **78.75

SECRETARY OF THE
TALLAHASSEE COUNTY

2006 OCT 26 PM 4:12

FILED

W06-47442

D. Brown NOV 14 2006



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 30, 2006

STEVE RADIFSKY
952 ECHO LANE
SUITE 450
HOUSTON, TX 77024

SUBJECT: SURETEC INSURANCE COMPANY
Ref. Number: W06000047442

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2006 OCT 26 P 4:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for SURETEC INSURANCE COMPANY and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

The number for the Secretary of the State of Texas is: (512) 463-5578.

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) 245-6972.

Doris Brown
Document Specialist

Letter Number: 906A00064104



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November 7, 2006

Ms. Doris Brown
Document Specialist
Florida Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

2006 OCT 26 P 4: 12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

VIA OVERNIGHT MAIL

RE: SureTec Insurance Company
Ref # W06000047442
Letter # 906A00064104

Dear Ms. Brown,

Thank you for your letter.

In it you state "the certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized".

However, I have been told that in the State of Texas, certificates of existence for INSURANCE COMPANIES are issued only by the Texas Department of Insurance, in the form of certified copies of our Certificate of Authority. In our submission, and re-attached to this letter, is a copy of our Certificate of Authority, certified as authentic by the Commissioner of Insurance as of August 28, 2006, which is within the 90 day period.

We would very much appreciate you accepting these documents as proof of existence in Texas and processing our Florida application, so that our application for authority to write insurance in Florida that is currently pending before the Florida Office of Insurance Regulation can proceed.

If you have any questions or need further documentation, please contact me. I can be reached, toll free at 888 344 3362 or by email at srakofsky@suretec.com.

Thank you for your assistance.

Sincerely,



Steve Rakofsky

COVER LETTER

FILED

TO: New Filing Section
Division of Corporations

2006 OCT 26 P 4: 12

SUBJECT: SureTec Insurance Company
(Name of corporation - must include suffix)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Steve Rakofsky

(Name of Person)

SureTec Insurance Company

(Firm/Company)

952 Echo Lane Suite 450

(Address)

Houston, Texas 77024

(City/State and Zip code)

For further information concerning this matter, please call:

Steve Rakofsky

(Name of Person)

at (713) 683-1477

(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. SureTec Insurance Company

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Texas

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

3. 76 0568746

(FEI number, if applicable)

4. July 1, 1998

(Date of incorporation)

5. Perpetual

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

6. 952 Echo Lane Suite 450 Houston, Texas 77024

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

7. 952 Echo Lane Suite 450 Houston, Texas 77024

(Principal office address)

952 Echo Lane Suite 450 Houston, Texas 77024

(Current mailing address)

8. surety 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: C T 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.

C T Corporation System

Jane Zachritz
Assistant Secretary

By: Jane Zachritz
(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:

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

A. DIRECTORS

Chairman: John Knox, Jr.

Address: 952 Echo Lane Suite 450
Houston, Texas 77024

Vice Chairman: _____

Address: _____

Director: see attached list

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Bill King

Address: 952 Echo Lane Suite 450
Houston, Texas 77024

Vice President: see attached list

Address: _____

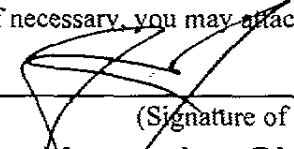
Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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. John Knox, Jr., Chairman and CEO

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SureTec Insurance Company

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2006 OCT 26 P 4: 12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Listing of Directors and Officers for Application to Florida:

Directors:

John Thomas Knox
Bill Jack King
Emory Landrum White, Jr.
Edward Hardin Ellis, Jr.
Billy Ray Lyde
Hamendra Prabhulal Ojha
Robert Verne Skelton

[REDACTED]

Officers

| | | |
|------------------------|------------|---|
| John Thomas Knox, Jr. | [REDACTED] | Chairman |
| Bill Jack King | [REDACTED] | President |
| David Allen Wisnoski | [REDACTED] | Treasurer |
| Steven Douglas Nelson | [REDACTED] | Executive Vice President and General Counsel |
| Robert D. Cave | [REDACTED] | Senior Vice President and Senior Underwriting Officer |
| Michael Paul Whisenant | [REDACTED] | Vice President |



Texas Department of Insurance

Financial, Company Licensing & Registration, Mail Code 305-2C
333 Guadalupe • P. O. Box 149104, Austin, Texas 78714-9104

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF TEXAS §
 §
COUNTY OF TRAVIS §

The Commissioner of Insurance, as the chief administrative and executive officer and custodian of records of the Texas Department of Insurance has delegated to the undersigned the authority to certify the authenticity of documents filed with or maintained by or within the custodial authority of the Company Licensing & Registration Division of the Texas Department of Insurance.

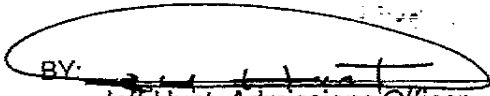
Therefore, I hereby certify that the attached documents are true and correct copies of the documents described below. I further certify that the documents described below are filed with or maintained by or within the custodial authority of the Company Licensing & Registration Division of the Texas Department of Insurance.

Current Certificate of Authority for SURETEC INSURANCE COMPANY, Houston, Texas, No. 11927 dated July 1, 1998, consisting of one (1) page.

IN TESTIMONY WHEREOF, witness my hand and seal of office at Austin, Texas, this 28th day of August 2006.

MIKE GEESLIN
COMMISSIONER OF INSURANCE

BY:


Jeff Hunt, Admissions Officer
Company Licensing & Registration Division
Order No. 01-0692

Texas Department of Insurance

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2006 OCT 26 P 4: 12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Certificate No. 11927



Company No. 09-094942

Certificate of Authority

THIS IS TO CERTIFY THAT

SURETEC INSURANCE COMPANY

HOUSTON, TEXAS

has complied with the laws of the State of Texas applicable thereto and is hereby authorized to transact the business of

Liability other than Automobile; Fidelity & Surety and
Reinsurance on all lines authorized to be written on a direct basis

insurance within the state of Texas. This Certificate of Authority shall be in full force and effect until it is revoked, canceled or suspended according to law.

IN TESTIMONY WHEREOF, witness my hand and seal of
office at Austin, Texas, this

1st day of July A.D. 1998

ELTON BOMER
COMMISSIONER OF INSURANCE

BY

A handwritten signature in cursive script, appearing to read "Kathy A. Wilcox".

Kathy A. Wilcox
Director
Insurer Services