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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

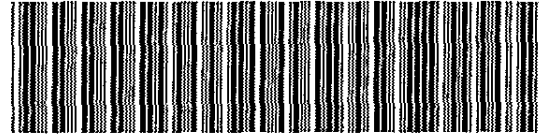
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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D. WHITE JAN 31 2007

NationWeld Risk Retention Group, Inc.

December 27, 2006

Registration Section
Division of Corporations
State of Florida
P. O. Box 6327
Tallahassee, FL 32314

Re: NationWeld Risk Retention Group, Inc. ("NationWeld")
NAIC Company Code: 12579; NAIC Group Code: 0000; FEIN: 20-4966537

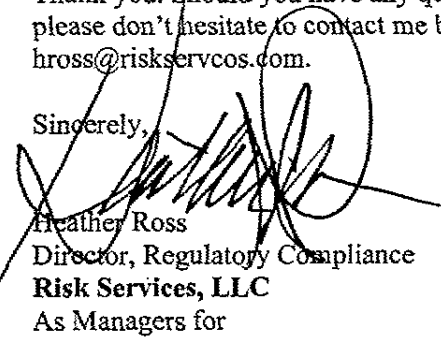
Dear Sir/Madam:

The enclosed Application by the above-referenced corporation is submitted in accordance with the directive of the Florida Office of Insurance Regulation relative to the company's registration filing made with that Office. Accordingly, enclosed please find the following:

1. Transmittal Letter;
2. Application by Foreign Corporation for Authorization to Transact Business in Florida;
3. Original Certificate of Good Standing, issued by the District of Columbia Department of Insurance, Securities and Banking, the official having custody of the company's corporate records in the jurisdiction of the company's incorporation;
4. Check in the amount of \$78.75 in payment of the Division's filing and certified copy fees.

Thank you. Should you have any questions or require anything further in connection with this matter, please don't hesitate to contact me by telephone at (703) 812-8425 or by e-mail at hross@risksvcos.com.

Sincerely,



Heather Ross
Director, Regulatory Compliance
Risk Services, LLC
As Managers for
NationWeld Risk Retention Group, Inc.

HR/neg

Enclosures

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NationWeld 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:

Heather Ross

(Name of Person)

Risk Services

(Firm/Company)

1501 Wilson Boulevard, Suite 1110

(Address)

Arlington, VA 22209

(City/State and Zip code)

For further information concerning this matter, please call:

Heather Ross

(Name of Person)

at (703) 812-8425

(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

**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. NationWeld 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. District of Columbia

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

3. 20-4966537

(FEI number, if applicable)

4. 5/11/06

(Date of incorporation)

5. Perpetual

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

6. Upon registration

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

7. 5101 Wisconsin Avenue, N.W., Washington, D.C., 20016

(Principal office address)

c/o Risk Services, 1501 Wilson Boulevard, Ste. 1110, Arlington, VA, 22209

(Current mailing address)

8. See Attachment 1.

(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: Michael T. Rogers

Office Address: Risk Services, 1800 Second Street, Ste. 909

Sarasota, Florida 34236

(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.


(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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TALLAHASSEE, FLORIDA

A. DIRECTORS

Director
Chairman: Wally Brant

Address: Indiana Oxygen Company, Inc., P.O. Box 78588, Indianapolis, IN 46278

Director
Vice Chairman: Laurie Waller

Address: Sky Oxygen Carnegie, 2790 Idlewood Avenue, Carnegie, PA 15106

Director: Jim Madison

Address: Prest-O-Sales and Service, Inc., 40-14 19 Avenue, Long Island City, NY 11105

Director: Bob Thorton

Address: South Jersey Welding Supply, 94 W. Forest Grove Road, Vineland, NJ 08360

B. OFFICERS

President: Wally Brant

Address: Indiana Oxygen Company, Inc., P.O. Box 78588, Indianapolis, IN 46278

Vice President: Jim Madison

Address: Prest-O-Sales and Service, Inc., 40-14 19 Avenue, Long Island City, NY 11105

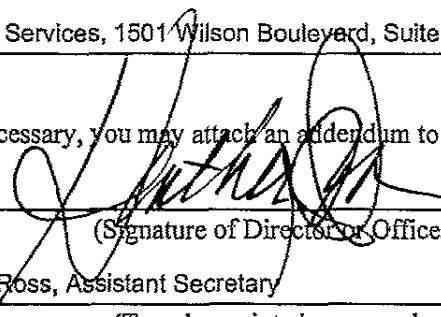
Treasurer/
Secretary: Laurie Waller

Address: Sky Oxygen Carnegie, 2790 Idlewood Avenue, Carnegie, PA 15106

Asst. Secretary:
~~Treasurer~~ Heather Ross

Address: Risk Services, 1501 Wilson Boulevard, Suite 1110, Arlington, VA, 22209

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. Heather Ross, Assistant Secretary
(Typed or printed name and capacity of person signing application)

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07 JAN 29 AM 8:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

State of Florida
Division of Corporations
Application By Foreign Corporation For Authorization
To Transact Business In Florida

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NationWeld Risk Retention Group, Inc.

Continuation of Question 12(A)

Additional Directors:

<u>Name</u>	<u>Address</u>
Tom Smith	DeLille Oxygen Company 772 Marion Road Columbus, OH 43207
Angela Harrison	WELSCO, Inc. 9006 Crystal Hill Road North Little Rock, AR 72113
Bill McCourt	ABCO Welding Industrial Supply Company 130 Cross Road Waterford, CT 06385
Dave Mahoney	Albany Welding Supply Co., Inc. d/b/a AWESCO 20 Center Street Albany, NY 12204
B. Troy Winch	Risk Services 1800 Second Street, Ste. 909 Sarasota, FL 34236

State of Florida
Division of Corporations
Application By Foreign Corporation For Authorization
To Transact Business In Florida

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NationWeld Risk Retention Group, Inc.
Attachment 1

Purpose(s) of corporation authorized in home state or country to be carried out in the State of Florida:

The purpose for which the Corporation is organized are to engage in the business of insuring and reinsuring various risk and to carry on and conduct any lawful act or activity permitted insurance companies, including Risk Retention Groups, under District of Columbia law. Additionally, the Corporation has all the powers afforded an association captive insurer risk retention group incorporated pursuant to The Captive Insurance Company Act of 2004, D.C. Law 15-834, and the Risk Retention Act of 1993, D.C. Law 10-46, and any amendments thereto. The Corporation has the power to do all things necessary or convenient to carry out its business and affairs.

Government of the District of Columbia
Department of Insurance, Securities and Banking



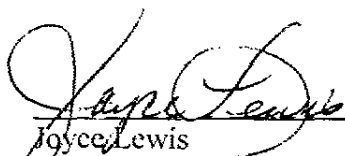
Thomas E. Hampton
Commissioner

Risk Finance Bureau

CERTIFICATE OF GOOD STANDING

I HEREBY CERTIFY THAT THE **NationWeld Risk Retention Group, Inc.**, IS
CURRENTLY LICENSED, AND IN COMPLIANCE WITH ALL APPLICABLE LAWS AND
REGULATIONS IN THE DISTRICT OF COLUMBIA AS OF THE DATE SET FORTH
BELOW.

HEREUNTO SET MY HAND AND
THE OFFICIAL SEAL OF THIS
DEPARTMENT FOR THE COMMISSIONER
OF INSURANCE THIS 20th
DAY OF December 2006.



Joyce Lewis
Staff Assistant
Risk Finance Bureau

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TALLAHASSEE, FLORIDA

SEAL