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Florida Department of State
Division of Corporations
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From: Account Name : CORPORATION SERVICE COMPANY / hzc
Account Number : 120000000195
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FOREIGN PROFIT/NONPROFIT CORPORATION

EXCELSIOR INSURANCE COMPANY

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cf. 3-1

H07000054316 3

**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. Excelsior Insurance 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. New Hampshire

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

3. 15-0302550

(FEI number, if applicable)

4. July 19, 1988

(Date of incorporation)

5. perpetual

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

6. Upon filing

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

7. 62 Maple Avenue, Keene, NH 03431

(Principal office address)

175 Berkeley Street, Boston, MA 02117

(Current mailing address)

8. This corporation is organized for the purpose of conducting insurance business

(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: **Corporation Service Company**

Office Address: **1201 Hays Street**

Tallahassee

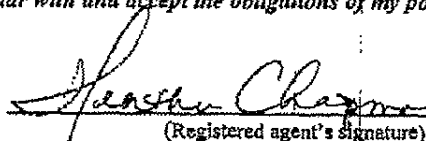
(City)

Florida 32301

(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)

**Heather Chapman
as its agent**

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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NO. 796

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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: See Attached Sheet

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: See Attached Sheet

Address: _____

Vice President: _____

Address: _____

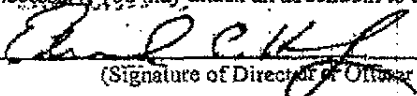
Secretary: _____

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. Edmund C. Kenealy, Secretary
(Typed or printed name and capacity of person signing application)

H07000054316 3

FEB. 28. 2007 2:58PM

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NO. 796 P. 4

Exterior Insurance Company
Corporate Officers

<u>Name</u>	<u>Title</u>	<u>Street Address</u>
Gary R. Gregg	President, Chief Executive Officer	175 Berkeley Street, Boston, MA 02117
James F. Dore	Treasurer and Chief Financial	175 Berkeley Street, Boston, MA 02117
A. Alexander Fontanes	Executive Vice President, Chief Investment Officer	175 Berkeley Street, Boston, MA 02117
Joseph A. Gilles	Executive Vice President	175 Berkeley Street, Boston, MA 02117
Scott R. Goodby	Executive, Vice President, Chief Operating Officer	175 Berkeley Street, Boston, MA 02117
Edmund C. Kennealy	Secretary	175 Berkeley Street, Boston, MA 02117

H07000054316 3

Excelsior Insurance Company
Directors

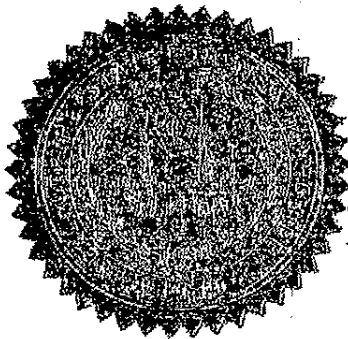
<u>Name</u>	<u>Street Address</u>
James F. Dore	175 Berkeley Street Boston, MA 02117
John D. Doyle	175 Berkeley Street Boston, MA 02117
A. Alexander Fontanes	175 Berkeley Street Boston, MA 02117
Joseph A. Gilles	175 Berkeley Street Boston, MA 02117
Scott R. Goodby	175 Berkeley Street Boston, MA 02117
Gary R. Gregg	175 Berkeley Street, Boston, MA 02117
Christopher C. Mansfield	175 Berkeley Street Boston, MA 02117

State of New Hampshire
Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify EXCELSIOR INSURANCE COMPANY is a New Hampshire corporation registered on JULY 19, 1988. I further certify that articles of dissolution have not been filed with this office.

INFORMATION REGARDING ANNUAL REPORTS AND/OR FEES MUST BE
OBTAINED FROM THE NEW HAMPSHIRE INSURANCE DEPARTMENT.



In TESTIMONY WHEREOF, I hereto
set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 27TH day of February, A.D. 2007

A handwritten signature in dark ink, appearing to read "William M. Gardner".

William M. Gardner
Secretary of State