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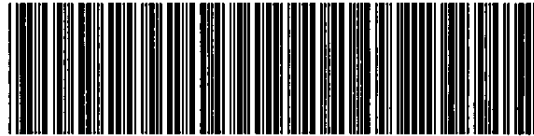
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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: AmTrust International Insurance, Ltd. 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:

Edward B. Lee

(Name of Person)

C/O AmTrust Financial Services, Inc.

(Firm/Company)

59 Maiden Lane, 6th Floor

(Address)

New York, NY 10038

(City/State and Zip code)

For further information concerning this matter, please call:

Edward Lee

(Name of Person)

at (646) 458-7928

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

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July 26, 2007

EDWARD B. LEE
59 MAIDEN LANE
6TH FLOOR
NEW YORK, NY 10038

SUBJECT: AMTRUST INTERNATIONAL INSURANCE LIMITED
Ref. Number: W07000035915

We have received your document for AMTRUST INTERNATIONAL INSURANCE LIMITED and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The person designated as registered agent in the document and the person signing as registered agent must be the same.

Please return the corrected original and one copy of 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) 245-6973.

Claretha Golden
Document Specialist
New Filing Section

Letter Number: 607A00046632

**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. AmTrust International Insurance, Ltd. 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. Bermuda

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

3. N / A

(FEI number, if applicable)

4. July 23, 1998

(Date of incorporation)

5. Perpetual

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

6. _____

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

7. 7 Reid Street, Suite 102 Hamilton HM 12 Bermuda

(Principal office address)

7 Reid Street, Suite 102 Hamilton HM 12 Bermuda

(Current mailing address)

8. Reinsurer

(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:

Jeffrey F. Corder

Office Address:

2005 Pan Am Circle Ste. 300

Tampa

(City)

, Florida

33607

(Zip code)

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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:

A. DIRECTORS

Chairman: Please refer to Exhibit "A"

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Please refer to Exhibit "A"

Address: _____

Vice President: _____

Address: _____

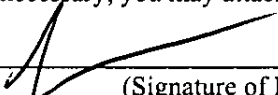
Secretary: _____

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. Stephen Ungar, Secretary

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

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Exhibit "A"

AmTrust International Insurance Limited
7 Reid Street, Suite 102
Hamilton HM 12
Bermuda

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Schedule of Directors and Officers

Directors

James M. Macdonald,
Chairman
Conyers, Dill & Pearman
Clarendon House, 2 Church St. Hamilton,
HMCX
Bermuda

Michael Karfunkel,
Director
American Stock Transfer & Trust Co.
59 Maiden Lane, 6th Floor
New York, NY 10038

George Karfunkel,
Director
American Stock Transfer & Trust Co.
59 Maiden Lane, 6th Floor
New York, NY 10038

Barry D. Zyskind,
Director
AmTrust Financial Services, Inc.
59 Maiden Lane
6th Floor
New York, NY 10038

Jay J. Miller
Director
430 East 57th Street
Suite 5D
New York, NY 10022

Harry Kast,
Alternate Director
Bott & Associates, Ltd.
7 Reid Street, Suite 102
Hamilton HM 12
Bermuda

Officers

Max G. Caviat,
President
12 Leadenhall Street
London, United Kingdom
EC3V, 1LP

Michael Bott,
Senior Vice President
7 Reid Street, Suite 102
Hamilton HM 12
Bermuda

Ronald E. Pipoly, Jr.
Vice President
5800 Lombardo Center # 200
Cleveland, OH 44131

Stephen Ungar
Secretary
59 Maiden Lane
6th Floor
New York, NY 10038

Andre Dill,
Assistant Secretary
Clarendon House, 2 Church St. Hamilton,
HMCX
Bermuda

Harry Schlachter
Treasurer
59 Maiden Lane,
6th Floor
New York, NY 10038



BERMUDA MONETARY AUTHORITY

BMA House
43 Victoria Street
Hamilton HM 12 Bermuda
P.O. Box 2447
Hamilton HM JX Bermuda

tel: (441) 295 5278 fax: (441) 292 7471
email: info@bma.bm website: www.bma.bm

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BERMUDA MONETARY AUTHORITY

THE INSURANCE ACT 1978

CERTIFICATE OF COMPLIANCE

I, Suzanne Williams, Assistant Director, Insurance Division of the Bermuda Monetary Authority,
do hereby certify that

AMTRUST INTERNATIONAL INSURANCE, LTD.

is a Company duly incorporated under the laws of Bermuda and, at the date of this Certificate, has
complied with the applicable provisions of the Insurance Act 1978 and Related Regulations ("the
Act"). The Company is registered under the Act as a Class 3 Insurer and Long-Term Insurer
authorised to carry on the business of insurance and reinsurance of all kinds. However, the insurer
shall not, without obtaining the prior written approval of the Bermuda Monetary Authority, write
any other insurance other than the Credit Life Insurance as described in the Company's
application dated 21st March, 2006.

Issued this 19th day of July 2007.

Suzanne Williams
Assistant Director
Insurance Division