F08000005408

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	, <u>, , , , , , , , , , , , , , , , , , </u>
(Cit	y/State/Zip/Phon	e #)
(-1	,	- ·· ,
PICK-UP	☐ WAIT	MAIL ,
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	Certificate	s of Status
,	-	
Special Instructions to I	Filing Officer:	
		:

Office Use Only



800139149598

12/23/08--01007--005 **78.75

SECRETARY OF STATE TALLYAHASSEE. FLORIDA

08 DEC 23 PM 3:





CHUBB LICENSING SERVICES LLC

15 Mountain View Road, P.O. Box 1615, Warren, New Jersey 07061-1615 • T: 800 824-6717 F: 908 903-4245

December 17, 2008

New Filing Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE: Certificate of Authority STATE OF FLORIDA

Please issue a Certificate of Authority to Roger Metzger Associates, Inc. so that the organization can transact business in the Florida. Enclosed are the following:

- 1. Application for Certificate of Authority
- 2. Certificate of Existence
- 3. Chubb Licensing Services check in the amount of \$78.75

If any additional information is needed to complete this request, please let me know via phone, or direct this submission back to my attention at the address provided below.

Chubb Licensing Services, LLC 15 Mountain View Road Warren, NJ 07061

Thank you for your cooperation.

Sincerely,

Michelle Jozefyk Licensing Specialist Chubb Licensing Services LLC mjozefyk@chubb.com (908) 903-2413

Enclosures

ahubblicansing con

COVER LETTER

	lew Filing Se Division of C			
SUBJEC	T: Roge	r Metzger Associates	, Inc.	
		(Name of cor	poration - must include suffi	x)
Dear Sir o	or Madam:			
"Certifica		ice," and check are submitt	on for Authorization to Tran ed to register the above refer	sact Business in Florida," renced foreign corporation to
Please ret	turn all corre	spondence concerning this	matter to the following:	
Michel	le Jozefyk	.		
		(N	ame of Person)	
Chubb	Licensing	Services, LLC		
		(Fi	rm/Company)	
15 Mou	ıntain Vie	w Road		
			(Address)	
Warren	, NJ 070:	59		
		(City	/State and Zip code)	
For furthe	er informatio	on concerning this matter, p	lease call:	
Michell	le Jozefyk	at (800 824-6717	
(Name of Per	rson)	(Area Code & Daytime Tele	phone Number)
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		New Filing Division of P.O. Box 6	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed	is a check fo	or the following amount:		
\$70.00	Filing Fee	\$78.75 Filing Fee & Certificate of Statu		\$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.

(If name unavail	able in Florida, enter alternate corporate na	ame ac	lopted for the purpose of transacting	business in Flor
New York		,]	13-3170033	
	under the law of which it is incorporated)		(FEI number, if applicable)	
07-11-83		5. F	5. Perpetual	
(Date	of incorporation)	(Duration: Year corp. will cease to e	exist or "perpetu
80 Maiden I	•	7.150	Florida, if prior to registration) 2, F.S., to determine penalty liability 0038	·)
•	(Principal office			,
80 Maiden	Lane, Suite 1403, New York, N			
	(Current mailing	addre	ss)	
Insurance A	agency			
	s) of corporation authorized in home state of	or cou	ntry to be carried out in state of Flor	ida)
. Name and stre	et address of Florida registered agent: ((P.O.	Box NOT acceptable)	SEC
Name:	Corporation Service Compar	ny		岩田
Office Address:	1201 Hays Street		_	SEE S
	Tallahassee		, Florida 32301 (Zip code)	OFI NIS
	(City)		(Zip code)	고교

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.

Michele Polsky Assistant VP

Corporation Service Company

(Registered agent's signature)

12. Names and business addresses of officers and/or directors:
A. DIRECTORS ,
Chairman:
Address:
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
Aldress.
B. OFFICERS
President: Richard Metzger
Address: 80 Maiden Lane, Suite 1403, New York, NY 10038
Address:
Vice President: Roger W. Metzger
Address: 80 Maiden Lane, Suite 1403, New York, NY 10038
Scoretary: Donald L. Kelly - Vice President
Address: 80 Maiden Lane, Suite 1403, New York, NY 10038
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. Ochan Metage
(Signature of Director of Officer listed in number 12 of the application) Richard Metzger-President
(Typed or printed name and capacity of person signing application)

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of ROGER METZGER ASSOCIATES, INC. was filed on 07/11/1983, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



Witness my hand and the official seal of the Department of State at the City of Albany, this 08th day of December two thousand and eight.

Daniel Shapiro

Special Deputy Secretary of State

200812090142 * 45