

To 90000001232

(Requestor's Name)

(Address)

(Address)

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2009 MAR 25 P 3:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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March 24, 2009

Florida Department of State  
New Filing Section - Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301  
(850) 245-6052

FILED  
2009 MAR 25 PM 3:14  
TALLAHASSEE, FL

**RE: APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION  
TO TRANSACT BUSINESS IN FLORIDA  
MAXUM INDEMNITY COMPANY**

Dear Sir/Madam

Enclosed please find the following information:

- Completed Cover Letter;
- Completed Application by Foreign Corporation for Authorization to Transact Business in Florida, including list of current officers and directors;
- Original Certificate of Existence from the State of DE showing Maxum Indemnity Company in good standing. *Please note this is not a copy, but the original certification received by us from Delaware. As noted on the certification, the certificate can be verified online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml); and*
- A check in the amount of \$78.75 for Filing Fee and Certificate of Status.

Please feel free to contact me at (678) 597-4673 if you have any questions or need any further information.

Sincerely,

Belinda Randall  
Senior Compliance Analyst

**COVER LETTER**

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2003 MAR 25 P 3:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Maxum Indemnity Company

(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:

Belinda Randall

(Name of Person)

Maxum Indemnity Company

(Firm/Company)

6455 East Johns Crossing, Suite 325

(Address)

Duluth, GA 30097

(City/State and Zip code)

For further information concerning this matter, please call:

Belinda Randall

(Name of Person)

at ( 678 ) 597-4673

(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. Maxum Indemnity 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. Delaware

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

3. 51-0097283

(FEI number, if applicable)

4. 01/02/2003

(Date of incorporation)

5. Perpetual

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

6. N/A

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

7. 1209 Orange Street, Wilmington, DE 19801

(Principal office address)

6455 East Johns Crossing, Suite 325, Duluth, GA 30097

(Current mailing address)

8. Commercial Insurance Company

(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: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

, Florida 33324

(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.*

Dale W. Morris

DALE W. MORRIS  
ASSISTANT VICE PRESIDENT

(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 see the attached list of officers and directors.

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Please see the attached list of officers and directors.

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. David M. Green - Vice President, General Counsel

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



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2009 MAR 25 P 3:14  
SECRETARY OF STATE  
MINNESOTA

## Maxum Indemnity Company

### Directors

**Gopon, Gene**

**Director, Chairman**

30 Scott Loop, Highland Park, IL 60035

**Hamm, Edward**

**Director**

408 St. Peter Street, Suite 434, St. Paul, MN 55102

**Hamm, Edward, Jr.**

**Director**

10 Isle Ridge, Hobe Sound, FL 33455

**Peterson, William**

**Director**

2600 Eagan Woods Drive, Suite 150, Eagan, MN 55121

**Simon, Jerome**

**Secretary, Director**

3300 Wells Fargo Center, 90 South Seventh Street, Minneapolis, MN 55402

**Smith, Brian**

**Director**

2600 Eagan Woods Drive, Suite 150, Eagan, MN 55121

**Turner, F. Marshall, II**

**President, CEO, Director**

6455 E. Johns Crossing, Suite 325, Duluth, GA 30097

**Wicker, James**

**Director**

2178 Lemay Lake Drive, Mendota Heights, MN 55120

### Officers

**Turner, F. Marshall, II**

**President, CEO**

6455 E. Johns Crossing, Suite 325, Duluth, GA 30097

**Clemens, Charles**

**Senior Vice President, CIO**

6455 E. Johns Crossing, Suite 325, Duluth, GA 30097

**DeJesso, Peter**

**Senior Vice President, Specialty Claims**

6455 E. Johns Crossing, Suite 325, Duluth, GA 30097

**Pratte, James**

**Senior Vice President, Casualty Brokerage**

6455 E. Johns Crossing, Suite 325, Duluth, GA 30097

**Waite, Karl**

**Senior Vice President, CFO, Treasurer**

6455 E. Johns Crossing, Suite 325, Duluth, GA 30097



**Biondich, Donna**

**Burnett, Matthew**

**Cloud, Glenn**

**Dickson, Norma**

**Green, David**

**Hathaway, Doug**

**Hutchings, Becky**

**Sforzo, Rick**

**Taube, Nick**

**Ainsworth, Bill**

**Brost, Dawn**

**Dunaway, Matt**

**Jenks, Brenda**

**Muller, Eileen**

**Speak, Robert**

**York, Stephen**

**Vice President, Specialty Claims**

6455 E. Johns Crossing, Suite 325, Duluth, GA 30097

**Vice President, Controller**

6455 E. Johns Crossing, Suite 325, Duluth, GA 30097

**Vice President, Casualty Brokerage**

6455 E. Johns Crossing, Suite 325, Duluth, GA 30097

**Vice President, Binding**

6455 E. Johns Crossing, Suite 325, Duluth, GA 30097

**Vice President, General Counsel**

6455 E. Johns Crossing, Suite 325, Duluth, GA 30097

**Vice President, Transportation**

6455 E. Johns Crossing, Suite 325, Duluth, GA 30097

**Vice President, Operations**

6455 E. Johns Crossing, Suite 325, Duluth, GA 30097

**Vice President, Transportation Claims**

6455 E. Johns Crossing, Suite 325, Duluth, GA 30097

**Vice President, Professional Liability**

6455 E. Johns Crossing, Suite 325, Duluth, GA 30097

**Assistant Vice President, IT**

6455 E. Johns Crossing, Suite 325, Duluth, GA 30097

**Assistant Vice President, Casualty Brokerage**

6455 E. Johns Crossing, Suite 325, Duluth, GA 30097

**Assistant Vice President, Binding**

6455 E. Johns Crossing, Suite 325, Duluth, GA 30097

**Assistant Vice President, Transportation**

6455 E. Johns Crossing, Suite 325, Duluth, GA 30097

**Assistant Vice President, Transportation**

6455 E. Johns Crossing, Suite 325, Duluth, GA 30097

**Assistant Vice President, Professional Liability**

6455 E. Johns Crossing, Suite 325, Duluth, GA 30097

**Assistant Vice President, IT**

6455 E. Johns Crossing, Suite 325, Duluth, GA 30097

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MAR 25 2009  
DULUTH, GA

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# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MAXUM INDEMNITY COMPANY" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-THIRD DAY OF MARCH, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MAXUM INDEMNITY COMPANY" WAS INCORPORATED ON THE THIRTY-FIRST DAY OF MAY, A.D. 1962.

FILED  
2009 MAR 25 P 3:14  
SECRETARY'S OFFICE  
DELAWARE

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Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 7201321

DATE: 03-23-09