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Florida Department of State
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FOREIGN PROFIT/NONPROFIT CORPORATION

USI Insurance Services of Rhode Island, Inc.

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Electronic Filing Menu

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Help

**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. USI Insurance Services of Rhode Island, 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. Rhode Island 3. 05-0217280
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. December 29, 1933 5. Perpetual
(Date of incorporation) (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. 555 Pleasantville Rd., Briarcliff Manor, NY 10510
(Principal office address)
- 555 Pleasantville Rd. Briarcliff Manor, NY 10510
(Current mailing address)

8. Insurance Brokers
(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: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(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.

By: Mark S. Eppley
(Registered agent's signature)

C T Corporation System
Assistant Vice-President
and Secretary

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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TALLAHASSEE FLORIDA

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Ernest J. Newborn, II

Address: 555 Pleasantville Rd., Briarcliff Manor, NY 10510

Director: _____

Address: _____

B. OFFICERS

President: Glenn Chavious

Address: 475 Kilvert St., Warwick, RI 02886

Vice President: _____

Address: _____

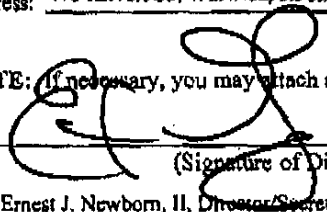
Secretary: Ernest J. Newborn, II

Address: 555 Pleasantville Rd., Briarcliff Manor, NY 10510

Treasurer: Glenn Chavious

Address: 475 Kilvert St., Warwick, RI 02886

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. Ernest J. Newborn, II, Director/Secretary
(Typed or printed name and capacity of person signing application)



State of Rhode Island and Providence Plantations

A. Ralph Mollis

Secretary of State

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The Office of the Secretary of State of the State of Rhode Island and Providence Plantations, HEREBY CERTIFIES, that

USI Insurance Services of Rhode Island, Inc.

a Rhode Island corporation, filed articles of association in this office on the 29th day of December, 1933; and

IT IS FURTHER CERTIFIED that as of this date said corporation is duly organized and existing under and by virtue of the laws of the State of Rhode Island and is in good standing according to the records of this office.

SIGNED AND SEALED this eighteenth
day of May, A.D. 2009.

A. Ralph Mollis

Secretary of State

BY Debra Antonelli

