

**F09000004637**

**Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet**

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**To:**

Division of Corporations  
Fax Number : (850) 617-6381

**From:**

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5368

**\*\*Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.**

Email Address: ldelouche@nfp.com

**FOREIGN PROFIT/NONPROFIT CORPORATION  
NFP Property & Casualty Services, Inc.**

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$78.75

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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J. Shivers NOV 25 2009

**COVER LETTER**

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

**SUBJECT:** NFP Property & Casualty Services, 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:

Lauren Elizabeth DeLouche

Name of Person

NFP Corp

Firm/Company

1250 Capital of Texas Hwy S Bldg 2 Ste 125

Address

Austin, TX 78746

City/State and Zip code

ldelouche@nfp.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lauren Elizabeth DeLouche

at ( 512 ) 697 6869

Name of Person

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

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TALLAHASSEE, FLORIDA

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**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. NFF Property & Casualty Services, 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. New York, NY

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

3. 13 3616686

(FEI number, if applicable)

4. 03.12.1991

(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. 707 Westchester Ave, White Plains, NY 10604

(Principal office address)

707 Westchester Ave, White Plains, NY 10604

(Current mailing address)

8. insurance sales and marketing

(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: \_\_\_\_\_

C T Corporation System

(Registered agent's signature)

**Chris McNear**  
**Assistant 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

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

**A. DIRECTORS**

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

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

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

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

Director: Brett Schneider

Address: 340 Madison Avenue, 19th Floor New York, NY 10173

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

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

**B. OFFICERS**

President: George Biancardi

Address: 340 Madison Avenue, 19th Floor New York, NY 10173

Vice President: David Maxham

Address: 340 Madison Avenue, 19th Floor New York, NY 10173

Secretary: Lauren DeLouche

Address: 1250 S Capital of Texas Hwy Bldg 2 Ste 125, Austin, Texas 78746

Treasurer: David Maxham

Address: 340 Madison Avenue, 19th Floor New York, NY 10173

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Lauren DeLouche  
(Signature of Director or Officer listed in number 12 of the application)

14. Lauren DeLouche - secretary  
(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**State of New York**  
**Department of State** } ss:

I hereby certify, that the Certificate of Incorporation of NFP PROPERTY & CASUALTY SERVICES, INC. was filed on 03/12/1991, under the name of PREFERRED INSURANCE AGENCY SERVICES LTD., 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.

A Certificate of Amendment PREFERRED INSURANCE AGENCY SERVICES LTD., changing its name to PREFERRED SERVICES GROUP OF N.Y., LTD., was filed 05/06/1991.

A Certificate of Amendment PREFERRED SERVICES GROUP OF N.Y., LTD., changing its name to NFP PROPERTY & CASUALTY SERVICES, INC., was filed 04/18/2008.



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*Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 23rd day of November  
two thousand and nine.*

Daniel Shapiro  
First Deputy Secretary of State

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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