# F0900000047112

(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	· · · · · · ·
Certified Copies	_ Certificates	s of Status
Special instructions to	Filing Officer:	
	•	

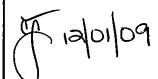




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## **COVER LETTER**

TO: New Filing Section Division of Corporations		
SUBJECT: Obstetricians & Gynecologists Ri	sk Retention Group of America. Inc	<b>)</b> .
	n - must include suffix	<u> </u>
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good Star referenced foreign corporation to transact business in I	nding"and check are submitted to register	
Please return all correspondence concerning this matter	er to the following:	
Bjorn Hu	ubbard	
Name of		
Risk Servi	ces, LLC	
Firm/Con	······································	
1800 Second Str	eet, Suite 909E	
Add	ress	
Sarasota, I	FL 34236	
City/State	and Zip code	
bhubbard@risk		
E-mail address: (to be used	for future annual report notification)	
For further information concerning this matter, please	call:	
Bjorn Hubbard at (941	955-0793 x 329	_
Name of Person Area	Code & Daytime Telephone Number	DIVISION OF 3
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	OV 30 PH 4:21
Enclosed is a check for the following amount:		.,
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & \$87.50 Filing Certified Cop Certificate  Certified Cop	of Status &

# 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 r		adopted for the purpose of transacting business in	r Florida)	_
2. Montana		3.	76-0844424		
	under the law of which it is incorporated)		(FEI number, if applicable)		-
4. 10/30/2006		5.	Perpetual		_
	of incorporation)	•	(Duration: Year corp. will cease to exist or "pe	rpetual")	
6					_
			in Florida, if prior to registration) 502, F.S., to determine penalty liability)		
7, 27 North 27th	n Street, Suite 1900, Billings, M	Γ 59	9103		_
	(Principal office	ado	iress)		_
c/o: Risk Ser	vices, 1800 Second Street, Suit	e 9	09E, Sarasota, FL 34236		_
	(Current mailing	g ado	dress)		
Coo Attoolio					. 2003
8. See Attache		or c	ountry to be carried out in state of Florida)	2009	- 3ĭ 3ĭ
•	•		•	00 NOV 30	SION
9. Name and stree	et address of Florida registered agent:	(P.0	O. Box <u>NOT</u> acceptable)	¥ 3	유동구
Name:	Eugene Rosov		<u></u>		
0.00	634 Bird Road			PH	POR
Office Address:	Coral Gables		, Florida 33146	<b>կ։</b> 2	OF STATE
Office Address:			(Zip code)	_	7⊼
Office Address:	(City)				

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. Name	s and	business	addresses	ΟI	onncers	and/or	airectors
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12. Names and business addresses of officers and/or directors.	DIVISION OF CORPORATION!
A. DIRECTORS	2009 NOV 30 PM 4: 21
Eugene Rosov	00 111 4. 21
Address: 634 Bird Road	
Coral Gables, FL 33146	
Michael Martin, MD	
Address: 2 Pacheco Street	
San Francisco, CA 94116	
Director: Emil DeVito	
Address: 23 Glen Lake Drive	
Medford, NJ 08055	
Director: Robert Durand	
Address: 27 North 27th Street, Suite 1900	
Billings, MT 59103	
B. OFFICERS	
President: Eugene Rosov	
Address: 634 Bird Road	
Coral Gables, FL 33146	
Vice President: Thomas Hawkins	
Address: 179 Woodward Lane	
Basking Ridge, NJ 07920	
Secretary: Andrew Cunningham	
Address: 634 Bird Road, Coral Gables, FL 33146	
Treasurer: Emil DeVito	
Address: 23 Glen Lake Drive, Medford, NJ 08055	
NOTE: If necessary, you may attach an addendum to the application listing addition 13.	
(Signature of Director or Officer listed in number 12 of the ap	pplication)
14. Eugene Rosov	

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

#### 8. PURPOSE

The Corporation may engage in any lawful business or business activity, including operating as a risk retention group and captive or other insurance company as regulated by the laws of Montana and the federal Liability Risk Retention Act of 1986 (15 U.S.C. 3901 et seq.), and may engage in such business or businesses in any state of province in which the Board of Directors decides to do business, including Montana.

#### 12 A. DIRECTORS

Director:

Ruth J. Schulze, M.D.

Address:

108 Oak Drive

Upper Saddle River, NJ 07458

Director:

Thomas Theocharides, M.D.

Address:

16 Shady Tree Lane Colts Neck, NJ 07722

#### 12 B. OFFICERS

Assistant Treasurer:

B. Troy Winch

Address:

1800 Second Street, Suite 909E

Sarasota, FL 34236

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# SECRETARY OF STATE

### STATE OF MONTANA

#### CERTIFICATE OF EXISTENCE

I, Linda McCulloch, Secretary of State of the State of Montana, do hereby certify that

OBSTETRICIANS & GYNECOLOGISTS RISK RETENTION GROUP OF AMERICA, INC.

duly filed its Articles of Incorporation in this office on 30 October 2006, and on that date was created a body politic and corporate.

I further certify that all fees reflected in the records of the Secretary of State have been paid by said corporation and that the most recent annual report has been filed with this office.

I further certify that no articles of dissolution have been placed on record in this office by said corporation and my records indicate the corporation is in good standing under the laws of the State of Montana and authorized to transact in business and conduct its affairs in this state.

The Secretary of State cannot certify that tax and penalties owed to this state on record with the Department of Revenue are current. Please contact the Department of Revenue at (406) 444-6900 to obtain information on tax status.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Montana, at Helena, the Capital, this 20 November 2009.

Jorde Mc Cullack

LINDA MCCULLOCH Secretary of State

Certified File Number: D162488

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SECRETARY OF STAIL