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PICK-UP WAIT MAIL							
(Business Entity Name)							
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Special Instructions to Filing Officer:							

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COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: Scottsdale Insurance Comp	any			
		- must include suffix		
Dear Sir or Madam:				
The enclosed "Application by Foreign Cos" "Certificate of Existence," or "Certificate above referenced foreign corporation to tra	of Good Stan	ding" and check are subr		
Please return all correspondence concerning	ng this matter	to the following:		
Patricia Zitkovic Robison				
	Name of	Person		
Scottsdale Insurance Company				
	Firm/Com	pany	,	
8877 N. Gainey Center Drive				
	Addre	ess		
Scottsdale, AZ 85258				
	City/State at	nd Zip code		
robisop1@scottsdaleins.com				
E-mail address:	(to be used f	or future annual report n	otification)	
For further information concerning this ma	atter, please c	all:		
Patricia Zitkovic Robison	at (⁴⁸⁰) 365-2078		
Name of Person	Area (Code & Daytime Telepho	one Number	AVH 010
STREET/COURIER ADDRESS New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	: :	MAILING AI New Filing Sec Division of Co P.O. Box 6327 Tallahassee, Fl	ction rporations	26 AMIO: 45
Enclosed is a check for the following amo	unt:			
\$70.00 Filing Fee \$78.75 Filing Certificate of		\$78.75 Filing Fee & Certified Copy	\$87.50 F Certifica Certified	ate of Status &



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 29, 2010

PATRICIA ZITKOVIC ROBISON 8877 N. GAINEY CENTER DRIVE SCOTTSDALE, AZ 85258

SUBJECT: SCOTTSDALE INSURANCE COMPANY

Ref. Number: W10000020671

We have received your document for SCOTTSDALE INSURANCE COMPANY and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$3,577.50.

If you have any further questions concerning your document, please call (850) 245-6973.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 410A00010576

2010 MAY 26 AM IO: 15



SCOTTSDALE INSURANCE COMPANY®

May 19, 2010

Ms. Claretha Golden Regulatory Specialist II New Filing Section Florida Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Re: Ref. Number: W10000020671

Dear Ms. Golden:

Per our telephone conversation of this morning, enclosed please find:

- 1) Your April 29, 2010 letter to me regarding the Application by Foreign Corporation for Authorization to Transact Business in Florida.
- 2) Affidavit signed by R. Lindsey McCutchan, Vice President Legal and Assistant Secretary stating Scottsdale Insurance Company has never transacted business in Florida prior to registration as stated in Florida Statute Section 607.150(2)(e).

If you should have any questions or need additional information, please feel free to contact me at 480-365-2078 or robisopl@scottsdaleins.com.

Thank you.

Very truly yours, Roberto

Patricia Zitkovic Robison Paralegal Specialist

Enclosures

IDMAY 26 AM In: L.S

AFFIDAVIT

SECRETARY OF CHAPTER OF CORRESPONDENCE OF CORRESPONDENCE AND 10:45

State of Arizona)	
)	SS
County of Maricopa)	

I, R. Lindsey McCutchan, Vice President – Legal and Assistant Secretary of Scottsdale Insurance Company, states as follows:

Per Florida statute Section 607.1501(2)(e),

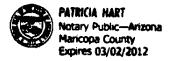
Scottsdale Insurance Company has never transacted business in Florida prior to registration. Scottsdale Insurance Company is a surplus lines insurer and sells through independent contractors.

FURTHER AFFIANT SAYETH NAUGHT.

Dated and signed this ______ day of May, 2010 in Scottsdale, Arizona.

R. Lindsey McCutchan Vice President – Legal and Assistant Secretary Subscribed and sworn to before me this <u>iath</u> day of May, 2010.

Notary Public



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.	Scottsdale Insu	rance Company						
	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")							
	(If name unavails	ible in Florida, enter alternate corporate na	me	adopted for the purpose of transacting business in Florid	a)			
2.	Ohlo		3.	31-1024978	,			
	(State or country	under the law of which it is incorporated)	•	(FEI number, if applicable)				
4.	01/04/1982	•	5.	Perpetual				
.,	(Date	of incorporation)		(Duration: Year corp. will cease to exist or "perpetual"	') ·			
6.	09/02/1982 (Scottsdale Insurance Company is a surplus lines insurer, a non-admitted insurer)							
				n Florida, if prior to registration) 502, F.S., to determine penalty liability)				
7.	8877 N. Gainey	Center Drive, Scottsdale, AZ 85258-21	108		:			
٠٠.		(Principal office	add	ress)				
	8877 N. Gainey	Center Drive, Scottsdale, AZ 85258-2	108	.				
		(Current mailing	adr	ress)				
8.	Insurer in the S	state of Ohio. Accredited Reinsurer in	Flo	rida				
	(Purpose(s)	of corporation authorized in home state o	r c	ountry to be carried out in state of Florida)	5,			
9.	Name and stree	t address of Florida registered agent: (P .0	D. Box NOT acceptable) HAY 26	Skor			
	Name:	CT Corporation System						
Oi	ffice Address:	1200 South Pine Island Road		, Florida 33324 5				
		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.

(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

SECRETARY OF JULY OF SIGN OF CORFESSION OF C

Chairman: Michael D. Miller 2010 HAY 26 AM 10: 45 Address: 8877 N. Gainey Center Drive Scottsdale, AZ 85258 Vice Chairman: Gary L. Tiepelman Address: 8877 N. Gainey Center Drive Scottsdale, AZ 85258 Director: Lawrence Hilsheimer Address: One Nationwide Plaza Columbus, OH 43215 Director: Susan F. Wain Address: 8877 N. Gainey Center Drive Scottsdale, AZ 85258 **B. OFFICERS** President: Michael D. Miller Address: 8877 N. Gainey Center Drive Scottsdale, AZ 85258 Vice President: R. Lindsey McCutchan Address: 8877 N. Gainey Center Drive, Scottsdale, AZ 85258 8877 N. Gainey Center Drive, Scottsdale, AZ 85258 Secretary: Robert W. Horner Address: One Nationwide Plaza, Columbus, OH 43215 Treasurer: Peter W. Harper Address: 8877 N. Gainey Center Drive, Scottsdale, AZ 85258 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) 14. R. Lindsey McCutchan, Vice President & Assistant Secretary

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

United States of America State of Ohio Office of the Secretary of State

I, Jennifer Brunner, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show SCOTTSDALE INSURANCE COMPANY, an Ohio corporation, Charter No. 704061, having its principal location in Columbus, County of Franklin, was incorporated on June 30, 1987 and is currently in GOOD STANDING upon the records of this office.

OINTSION OF CONFISION 45



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 21st day of April, A.D. 2010

Ohio Secretary of State

Validation Number: V2010111A11AEC