

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : 120000000195 : (850)521-1000 : (850)558-1515 Fax Number

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

Email Address:

FOREIGN PROFIT/NONPROFIT CORPORATION HARTFORD INSURANCE COMPANY OF THE SOUTHEAST

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1/12/2011

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Carina Dunlap Customer Service Specialist Corporation Service Company ph #800-927-9801 ext 2951 www.cscglobal.com

CSC recently launched the new CSCDashboard and CSCNavigator, the unified legal and compliance solution. Review our step-by-step instructions to help you reach the CSC services you use every day

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January 13, 2011

FLORIDA DEPARTMENT OF STATE

CORPORATION SERVICE COMPANY Division of Corporations

SUBJECT: HARTFORD INSURANCE COMPANY OF THE SOUTHEAST

REF: W11000002349

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

If you have any further questions concerning your document, please call (850) 245-6962.

Valerie Herring Regulatory Specialist II New Filing Section FAX Aud. #: H11000010241 Letter Number: 011A00001218 2/10/2011 2:57:56 PM PAGE



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February 8, 2011

Florida Department of State R. A. Gray Building 500 South Bronough Street Tallahassee, FL 32399-0250

Re: Hartford Insurance Company of the Southeast Consent for Use of Company Name

Dear Sir/Madam:

Pursuant to Chapter 607.0403(5) of the Florida Statutes, I, Terence Shields, authorized officer of Hartford Insurance Company of the Southeast (the "Company"), hereby consent that Hartford Insurance Company of the Southeast will not revoke its dissolution granted by the State of Florida on January 7, 2011, as a domestic company. I understand that this consent is necessary in order to allow Hartford Insurance Company of the Southeast as a foreign company to be qualified to do business in the state of Florida under said name.

If you have any questions regarding this matter, please contact me at 860-547-7187.

Sincerely,

Hartford Insurance Company of the Southeast

Terence Shields

Corporate Secretary

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRAN 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.

4	rance Company of the Southeast		
	orporation; must include "INCORPORATI	ED.	," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Co	orp," "Inc," "Co," or "Corp.")		
(If name unavaila	able in Florida, enter alternate corporate na	uno	adopted for the purpose of transacting business in Florida)
2. CT	•	3.	06-1013048
	under the law of which it is incorporated)	• •	(FEI number, if applicable)
4. December 07,	, 2005	5.	Perpetual
(Date	of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")
6. December 7.	2005		
	(Date first transacted busine		in Florida, if prior to registration)
	(SEE SECTIONS 607.1501 & 60	7.1	502, F.S., to determine penalty liability)
7. One Hartford I	Plaza, Hartford, CT 06155		
	(Principal office	ado	iress)
One Hartford I	Plaza, Hartford, CT 06155		
	(Current mailing	ado	dress)
8. insurance			
	e) of corporation authorized in home state of	T C	ountry to be carried out in state of Florida)
(i urposoci	y of corporation administration in norms said t		, and the second
Name and <u>street</u>	et address of Florida registered agent: ((P.	O. Box NOT acceptable)
Name:	Corporation Service Company		and the same of th
Office Address:	1201 Hays Street		
	Tallahassee		, Florida 32301
	(City)		(Zip code)
			•

10. Registered agent's acceptance:

Having been named as registered agent und 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.

Corporation Service Company

Carina L. Dunlap Asst. 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.

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12. Names and business addresses of officers and/or directors:	
A. DIRECTORS	SECRETARY OF STATE TALLAHASSEE, FLORIDA
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director: Gregory McGreevey	
Address: One Hartford Plaza	
Hartford, CT 06155	
Director: Andre A. Napoli	
Address: One Hartford Plaza	
Hartford, CT 06155	
B. OFFICERS	
President: Andre A. Napoli	
Address: One Hartford Plaza	
Hartford, CT 06155	
Vice President: James M. Yanosy	
Address. One Hartford Plaza	
Hartford, CT 06155	<u></u>
Secretary: Terence D. Shields	
Address: One Hartford Plaza, Hartford, CT 06155	
Treasurer: Robert W. Paiano	
Address: One Hartford Plaza, Hartford, CT 06155	
NOTE: If necessary, you may attach an addendum to the application listing additional 13.	officers and/or directors.
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) aff are true and that he or she is aware that false information submitted in a document to the third degree felony as provided for in s.817.155, F.S. 14. Terence D. Shields, Corporate Secretary	

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

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Office of the Secretary of the State of Connecticut

SECRETARY OF STATE

I, the Connecticut Secretary of the State, and keeper of the seal thereof. FLORIDA DO HEREBY CERTIFY, that the certificate of incorporation of

HARTFORD INSURANCE COMPANY OF THE SOUTHEAST

a domestic STOCK corporation, was filed in this office on December 07, 2005, a certificate of dissolution has not been filed, and so far as indicated by the records of this office such corporation is in existence.

Secretary of the State

Date Issued: January 07, 2011

Business ID: 0841705

Express

Certificate Number: 2011004268001

Note: To verify this certificate, visit the web site http://www.concord.sots.ct.gov