

F11000004876

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

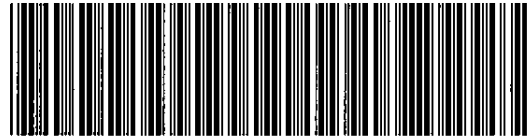
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers DEC 07 2011

## COVER LETTER

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

**SUBJECT:** Assured SKCG, 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," or "Certificate of Good Standing" 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:

Kris Diebold

Name of Person

Assured SKCG, Inc.

Firm/Company

2305 River Road

Address

Louisville, KY 40206

City/State and Zip code

lynn.bischak@neacelukens.com

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

For further information concerning this matter, please call:

Kris Diebold

at ( 502 ) 259-9240

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

**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. Assured SKCG, 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. Delaware

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

3. 45-3443572

(FEI number, if applicable)

4. 09/26/2011

(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. 160 Greentree Drive Suite 101, Dover, DE 19904

(Principal office address)

123 Main Street 14th Floor, White Plains, NY 10601

(Current mailing address)

8. Insurance Agency

(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

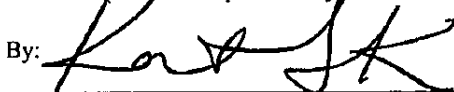
(City)

(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



**Katie Szramek**  
Assistant Secretary

(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**

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

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

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

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

Director: Jimmy W Henderson

Address: 123 Main Street 14th Floor

White Plains, NY 10601

Director: Thomas E Riley

Address: 123 Main Street 14th Floor

White Plains, NY 10601

**B. OFFICERS**

President: Jimmy W Henderson

Address: 123 Main Street 14th Floor

White Plains, NY 10601

Vice President: Eric Anderson

Address: 123 Main Street 14th Floor

White Plains, NY 10601

Secretary: Paul Vredenburg

Address: 123 Main Street 14th Floor, White Plains, NY 10601

Treasurer: Paul Vredenburg

Address: 123 Main Street 14th Floor, White Plains, NY 10601

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

13. \_\_\_\_\_

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Eric Anderson, Vice President

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

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Directors

David A. Donnini

Aaron D. Cohen

Joseph P. Nolan

Tannaz S. Chapman

Jim W. Henderson

Thomas E. Riley

Paul Vredenburg

Officers

Thomas R. Kozera – Chairman/CEO

Richard S. Canter – President/COO

David A. Parker – EVP

Sheila M. Conley – EVP

Jimmy W. Henderson – Sr. VP

Thomas E. Riley – Sr. VP

Paul Vredenburg – Sr. VP & Secretary

Eric E. Anderson – Sr. VP

Stanley K. Kinnett, II – Chief Corp Counsel

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# Delaware

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*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ASSURED SKCG, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTIETH DAY OF OCTOBER, A.D. 2011.


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TALLAHASSEE, FLORIDA

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111121533

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 9106765

DATE: 10-20-11