# F12000000157

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
CORRECTED "REGISTERED  AGENT "TO READ "C.F.O
P.O. BOX 6200 " PER
TELEPHONE CONVERSATION WITH JOANN MAZUR-KIELBUCK
Office Use Only 01/12/1



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## FLORIDA DEPARTMENT OF STATE Division of Corporations

October 21, 2011

JOANN MAZUR-KIELBLOCK 80 LIVINGSTON AVENUE ROSELAND, NJ 07068

SUBJECT: PRUCO INSURANCE COMPANY OF IOWA

Ref. Number: W11000054190

We have received your document for PRUCO INSURANCE COMPANY OF IOWA and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name and title of the person signing the document must be noted beneath or opposite the signature.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6949.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 611A00024202

## **COVER LETTER**

	Filing Sect			
SUBJECT:	Pruco Ins	urance Company of Iowa		
		Name of corpora	ation - must include suffix	
Dear Sir or M	ladam:			
"Certificate of	f Existence		for Authorization to Transa Standing" and check are sub siness in Florida.	
Please return	all correspo	ondence concerning this m	atter to the following:	
Joann Mazur	-Kielblock			
		Namo	e of Person	
Prudential Fi	nancial			
		Firm/	Company	
80 Livingston	Avenue			
		A	ddress	
Roseland, N.	J 07068			
		City/Sta	ate and Zip code	
joann.mazurl	ielblock@p	rudential.com	sed for future annual report	notification)
				nonneation)
For further in	formation c	oncerning this matter, plea	ase call:	
Joann Mazur	-Kielblock	at (973	չ 548-5716	
	e of Person		rea Code & Daytime Teleph	none 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	ne following amount:		
□ \$70.00 Fil	ing 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. Pruco Insurance	Company of Iowa				
	poration; must include "INCORPORATE", "Inc," "Co," or "Corp.")	ED," "COMPANY," "CORPORATION,"			
(If name unavailab	ale in Florida, enter alternate cornorate na	me adopted for the purpose of transacting bu	einess in Florida)		
	•		siness in Fiorida)		
2. lowa	nder the law of which it is incorporated)	3. 27-2457213	1 \		
•	•	(FEI number, if applicable)			
	April 26, 2010 5. Perpetual				
(Date o	f incorporation)	(Duration: Year corp. will cease to exis	t or "perpetual")		
6. Not Applicable					
		ss in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)			
7. 213 Washington	Street, Newark, New Jersey 07102-29	917			
	(Principal office a	address)			
80 Livingston Av	enue, Bldg. ROS3, Roseland, New Je	rsey 07068			
	(Current mailing a	address)			
8. lowa Insurer (Life		And the second s			
(Purpose(s)	of corporation authorized in nome state of	r country to be carried out in state of Florida	) 		
9. Name and street	address of Florida registered agent: (I	P.O. Box NOT acceptable)	Per 7		
Name:	CHIEF FINANCIAL OFF	ICER			
Office Address.	P 0 B0X 6200 (32314-	-6200)	The second		
Office Address:	— 200 E. GAINES ST		Di-		
	TALLAHASSEE, FL 3239	99-0000 US			
	(City)	(Zip code)			
10. Registered age	nt's acceptance:		യാസ് വ >>>		
Having been named	d as registered agent and to accept se	rvice of process for the above stated cor			
		ntment as registered agent and agree to s relative to the proper and complete pe			
	vith and accept the obligations of my		formance of my unites		
j					
	· · · · · · · · · · · · · · · · · · ·				
	(Registered agent's signatur	re)			

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	
Chairman: Lori L. High	
Address: 80 Livingston Avenue, Roseland, New Jersey 07068	
Vice Chairman: Helen M. Galt	
Address: 213 Washington Street, 14th Floor, Newark, New Jersey 071	102
Director: Wayne M. Benseler	····
Address: 80 Livingston Avenue, Roseland, New Jersey 07068	
Director: Christine Knight	
Address: 80 Livingston Avenue, Roseland, New Jersey 07068	Aca Z
	AM A TI
B. OFFICERS	Character Contraction
President: Lori L. High	R R [M
Address: 80 Livingston Avenue, Roseland, New Jersey 07068	# S
	, <b>D</b> +
Vice President: Terence J. Dwyer	<del></del>
Address: 80 Livingston Avenue, Bldg. ROS3, Roseland, New Jersey 0	7068
80 Livingston Avenue, Bldg. ROS3, Roseland, New Jersey 0	7068
Secretary: Michael Scharpf	· · · · · · · · · · · · · · · · · · ·
Address: 80 Livingston Avenue, Roseland, New Jersey 07068	
Treasurer: Thomas A. Hendry	
Address: 751 Broad Street, 23rd Floor, Newark, New Jersey 07102	
NOTE: If necessary you may attach an addendum to the application listing additional o	
13. (Signature of Director or Officer listed in number 12 of the applica	ation) CHRISTINE KNIGHT
14(Typed or printed name and capacity of person signing application	
(1) ped of printed hame and capacity of person signing appreauc	лі <i>)</i>

#### 12. Names and business addresses of officers and/or directors: (continued)

A. Directors

Director: Andrew J. Mako

Address: 80 Livingston Avenue, Roseland, New Jersey 07068

**B.** Officers

Chief Actuary: Wayne M. Benseler

Address: 80 Livingston Avenue, Roseland, New Jersey 07068

Chief Financial Officer: Christine Knight

Address: 80 Livingston Avenue, Roseland, New Jersey 07068

Chief Investment Officer: Steven E. Moehlmann

Address: 80 Livingston Avenue, Roseland, New Jersey 07068

Chief Legal Officer: Michael J. Scharpf

Address: 80 Livingston Avenue, Roseland, New Jersey 07068

Vice President and Craig R. Gardner

Sr. Investment Risk Officer

Address: 2 Gateway Center, 5<sup>th</sup> Floor, Newark, New Jersey 07102

### IOWA SECRETARY OF STATE MATT SCHULTZ



Date: 1/4/2012

#### CERTIFICATE OF EXISTENCE

Name: PRUCO INSURANCE COMPANY OF IOWA (490 DP - 397168)

Date of Incorporation: 4/26/2010

**Duration: PERPETUAL** 

I, Matt Schultz, Secretary of State of the State of Iowa, custodian of the records of incorporations, certify that the corporation named on this certificate is in existence and was duly incorporated under the laws of Iowa, that all fees required by the Iowa Business Corporation Act have been paid by the corporation, that the most recent biennial corporate report required has been filed by the Secretary of State, and that articles of dissolution have not been filed.

Certificate ID: CS61849

To validate certificates visit:

sos.iowa.gov/ValidateCertificate

Mätt Schultz

Iowa Secretary of State