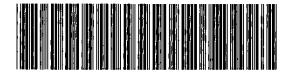
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(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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Office Use Only



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2012 JAN 23 AM ID: 44
SECRETARY OF STATE
TALLAHASSEE, FIORIE

Lehmers JAN 24 2012

MARGARET DEFOE CPA LLC

Certified Public Accountants

MARGARET DEFOE, CPA MA ACCOUNTING

FL INSTITUTE OF CPAS QUICKBOOKS PRO ADVISOR

January 18, 2012

Florida Department of State **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, Fl. 32301

Dear Sirs:

Re: Application by Osprey Special Risks Limited to Transact Business in Florida

We attached the following documents in support of our client's application for authorization to transact business in Florida:

- Our Check #1554 for \$78.75 to cover registration and Certificate of Status
- Cover Letter duly completed
- Application duly completed and signed
- Notarized Letter releasing the name Osprey Special Risks Inc.
- Original Certificate of Status for Osprey Special Risks Limited, U.K.

We look forward to receiving your letter of acknowledgement and the Certificate of Status.

Sincerely

Margaret Defoe, CPA

PRESIDENT

COVER LETTER

TO: New Filing Section				•	
Division of Corporations					
SUBJECT: Osprey Spec	ial Risks L	imited, Inc			
		ation - must include suf	fix		•
Dear Sir or Madam:					
The enclosed "Application by For "Certificate of Existence," or "Cer above referenced foreign corporations."	tificate of Good	Standing" and check ar			
Please return all correspondence c	oncerning this m	natter to the following:			
Margaret Defoe					_
	Nam	e of Person			-
MARGARET DEFOE	CPA LLC				_
	Firm	Company/			
16103 SW 107 PL					_
	I	Address			
MIAMI, FL. 33157					_
	City/St	ate and Zip code	5	1 N	
mdefoecpa@aol.com			r	2012 SEC	_
E-mail	address: (to be ı	sed for future annual re	port notification)	RE J	7
For further information concerning	g this matter, ple	ase call:	نا النا النا	23 RY (
Margaret Defoe	at (30	5 ₎ 256-0551	FLO		
Name of Person		rea Code & Daytime T	elephone Number		
			A,	*	
STREET/COURIER AD New Filing Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301		New Fili Division P.O. Box	ng ADDRESS: ng Section of Corporations (6327 see, FL 32314		
Enclosed is a check for the follow	ing amount:				
\$70.00 Filing Fee \$78.7 Cert	5 Filing Fee & ficate of Status	\$78.75 Filing Fee Certified Copy	□ Certific	Filing Fee, eate 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.

1.	Osprey Special Risks Limited, Inc	
	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	
	Osprey Special Risks, Inc	
	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	
	West Yorkshire, United Kingdom 3. Application to be made	
	(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4	April 24, 1969 5. Perpetual	
7,	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	
6.	N/A	
υ.	(Date first transacted business in Florida, if prior to registration)	
	(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
7.	1000 Firth Street, #200, Miami Beach, Fl. 33139	
	(Principal office address)	
	1000 Firth Street, #200, Miami Beach, Fl. 33139	
	(Current mailing address)	
8.	Marine Insurance Underwriters	
	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	
9.	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: MARGARET DEFOE CPA LLC	
	A TO A DETECTION OF THE PARTY O	
		-
О	ffice Address: 16103 SW 107 PL	
	ffice Address: 16103 SW 107 PL Miami , Florida 33157-2969	_)
	(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	
Chairman: Beric Anthony Usher	
Address: 5-6 Dalesway House, South Hawksworth Street, ILKLEY, West Yorkshire,	
LS 29 9LA, UK	
Vice Chairman: William P. Roversi	
Address: 1000 Firth Street, Suite 200, Miami Beach, FI 33139	
Director: Nicholas Peter Brown	_
Address: 5-6 Dalesway House, South Hawksworth Street, ILKLEY, West Yorkshire	
LS 29, 9LA, UK	
Director:	
Address:	
B. OFFICERS	
President: William P. Roversi	
Address: 1000 Firth Street, Suite 200	
Miami, Beach, FI 33139	T
Vice President: Beric Anthony Usher	******
Address: 5-6 Dslesway House, South Hawksworth Street, ILKLEY, West Yorkshire,	1
LS29 9LA, UK	A TOMP
Secretary: Michael George Calvert	·
Address: 5-6 Dalesway House, South Hawksworth Street, ILKLEY, West Yorkshire, LS29 9LA, U	K
Treasurer:	
Address:	
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 constitute third degree felony as provided for in s.817.155, F.S. 14. William P. Roversi, President Vice Chairman	s a

OSPREY



Special Risks Inc.

The Secretary of State

Florida Department of State

P.O. Box 6327

Tallahassee, Fl. 32314

Dear Sir/Madam:

Osprey Special Risks Inc. of Miami, Florida gives express consent to Osprey Special Risks Limited of likley, West Yorkshire in the United Kingdom, to use the name Osprey Special Risks Limited, Inc. to form a subsidiary company in the United State that will primarily offer Marine Insurance coverage potential customers.

With this consent, Osprey Special Risks Inc. hereby unequivocally and unconditionally releases use this name to Osprey Special Risks Limited.

AUTHORIZED BY: WP Roman

Date:-- 12/6/11

William Roversi

President

ERIKA VANDERBIEST
MY COMMISSION # EE 078644
EXPIRES: April 5, 2015
Bonded Thru Notary Public Underwriters

12/6/201



THE COMPANIES ACT 2006

Company No. 952756

The Registrar of Companies for England and Wales hereby certifies that OSPREY SPECIAL RISKS LIMITED (originally called A.K. RUMBOLD (HARROGATE) LIMITED changed its name on 27th May 1986 to T.L. DALLAS (MARINE) LIMITED which was changed on 1st August 1997 to T L DALLAS (SPECIAL RISKS) LIMITED which was changed on 22nd May 2008 to OSPREY SPECIAL RISKS LIMITED each change having been made by resolution) was incorporated under the Companies Acts 1948 to 1967 as a limited company on 24th April 1969.

The Registrar further certifies that according to the documents on the file of the company:-

- a) NICHOLAS PETER BROWN, MICHAEL GEORGE CALVERT, LEVENT ATAY OSMAN, ALEXANDER MARK THOMAS and BERIC ANTHONY USHER are the directors of the company,
- b) MICHAEL GEORGE CALVERT is the secretary of the company,
- c) the situation of the registered office is 5-6 DALESWAY HOUSE, SOUTH HAWKSWORTH STREET, ILKLEY, WEST YORKSHIRE LS29 9LA,
- d) the issued capital of the company is 900 shares of £1 each,
- e) RECREATIONAL CHARTER INSURANCE SERVICES LTD is the shareholder of the company.

According to the documents on file and in the custody of the Registrar, the company is up to date with its filing requirements and has at least 1 director, who is a natural person over the age of 16.

Given at Companies House, the 2nd December 2011

T FERREIRA

for the Registrar of Companies



This certificate records the result of a search of the information registered by the Registrar. This information derives from filings accepted in good faith without verification. For this reason the Registrar cannot guarantee that the information on the register is accurate or complete.