# F/2000000584

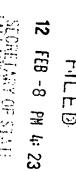
uestor's Name)	<del></del>
ress)	
ress)	
State/Zip/Phon	e #)
☐ WAIT	MAIL
ness Entity Nar	me)
ument Number)	
Certificates	s of Status
iling Officer:	
	ress)  State/Zip/Phon  WAIT  ness Entity Nai

Office Use Only



200219729382

02/08/12--01019--033 \*\*87.50



1/4

### **COVER LETTER**

TO: New Filing Sec Division of Cor			
SUBJECT: ZNAT	Insurance Comp	any	
		ition - must include suffix	
Dear Sir or Madam:			
"Certificate of Existenc		for Authorization to Transact Standing" and check are submainess in Florida.	
Please return all corresp	ondence concerning this ma	atter to the following:	
Bennett L. Katz			
	Name	e of Person	
Zenith Insuran	ce Company on b	ehalf of ZNAT Insu	rance Company
	Firm/	Company	
21255 Califa S	treet		
	A	ddress	_
Woodland Hills,	CA 91367		
	City/Sta	te and Zip code	
bkatz@thezenith.			
	E-mail address: (to be us	sed for future annual report no	otification)
For further information	concerning this matter, plea	se call:	
Bennett L. Katz	at ( 818	3 ) 251-8088	
Name of Person Area Code & Daytime Telephone Number			
New Filing Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations 3 Center Circle 32301	MAILING AD New Filing Sec Division of Cor P.O. Box 6327 Tallahassee, FL	tion porations
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. ZNAT Insura (Enter name of c	nce Company corporation; must include "INCORPORAT forp," "Inc," "Co," or "Corp.")	ED.	" "COMPANY," "CORPORATION,"	-
(If name unavail	able in Florida, enter alternate corporate na	ame	adopted for the purpose of transacting business in Florida)	_
2. California		3.	95-4103565	
(State or country	under the law of which it is incorporated)	-	(FEI number, if applicable)	-
4. April 30, 19	85	5.	Perpetual	_
(Date	of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")	_
6. <b>N/A</b>				_
			n Florida, if prior to registration) 502, F.S., to determine penalty liability)	12
<sub>7.</sub> 21255 Cali	fa Street, Woodland Hills, C	A !	91367	. 837
Same	(Principal office	add	ress)	-8
	(Current mailing	add	ress)	呈
<sub>8.</sub> Insurance				<b>↓</b> : 23
(Purpose(s	s) of corporation authorized in home state of	or co	ountry to be carried out in state of Florida)	•
9. Name and stree	et address of Florida registered agent: (	(P.C	D. Box NOT acceptable)	
Name:	Chief Financial Officer			
Office Address:	200 E. Gaines Street			
	Tallahassee		, Florida 32399	
	(City)		(Zip code)	
Having been nam designated in this further agree to c	application, I hereby accept the appoint	intn es r	ce of process for the above stated corporation at the nent as registered agent and agree to act in this capa elative to the proper and complete performance of m sition as registered agent.	city. I
_	(Registered agent's signatu	ure)		

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	" • J • E
Chairman: See Attached Addendum	FILED
Address:	12 FEB -8 PM 4: 23
Vice Chairman: See Attached Addendum	TALLAMASSEE, FLORID;
Address:	
Director: See Attached Addendum	
Address:	
Director: See Attached Addendum	
Address:	
B. OFFICERS	
President: See Attached Addendum	
Address:	
Vice President: See Attached Addendum	
Address:	
Secretary: See Attached Addendum	
Address:  Treasurer: See Attached Addendum	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing	g additional officers and/or directors.
Signature of Director or Officer The officer or director signing this document (and who is listed in number 1 are true and that he or she is aware that false information submitted in a doc third degree felony as provided for in s.817.155, F.S.	
14 Hyman Joe Lee Jr., Senior Vice President and Secretary	

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

### ADDENDUM TO APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLOR IDEAS -8 PM 4: 23

#### **ZNAT INSURANCE COMPANY**

Directors and Officers
As Listed on the Jurat Page of ZNAT's
Quarterly Statement as of September 30, 2011

#### **DIRECTORS**

Michael E. Jansen	05/20/2010
Jack D. Miller	05/20/2010
Kari L. Van Gundy	05/20/2010
Zax, Stanley Robert	05/20/2010

<u>OFFICERS</u>	POSITION	EFFECTIVE DATE
Zax, Stanley Robert	Chairman of the Board (CHR 06/02/86) (Pres 9/15/1	01/01/12
Miller, Jack David	President & CEO (EVP 05/15/03) (Pres. 09/02 (VC 03/15/11)	01/01/12
Clarke, Jason Travis	Executive Vice President & Chief Actuary	08/01/11
Jansen, Michael Ellis	Executive Vice President & General Counsel	02/07/06
Van Gundy, Kari Lynn	Executive Vice President, Chief Fine Officer & Treasurer (SVP & Treas 08/01/06) (CFO 06/08/10)	ancial 02/16/07
Pattiz, Davidson Matthew	Executive Vice President	03/15/09
Lee Jr., Hyman Joe	Senior Vice President and Secretary (VP 05/18/93) (Sec. 5/18/05)	05/13/09

Incorporated: 04/30/85 (California)

Address: 21255 Califa Street, Woodland Hills, CA 91367

Shareholder: Zenith Insurance Company

## State of California Secretary of State

CERTIFICATE OF STATUS

FILED.

12 FEB -8 PM 4: 23

SECRETARY OF STATE
ALLAMASSEE, FLOOMS.

ENTITY NAME:

ZNAT INSURANCE COMPANY

FILE NUMBER:

C1275329

FORMATION DATE:

04/30/1985

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of January 26, 2012.

**DEBRA BOWEN**Secretary of State