

F12000002721

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

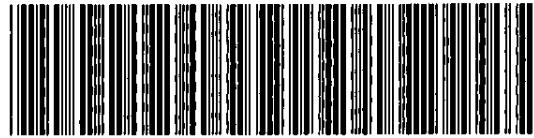
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

K07/02/12

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: White Pine Insurance Company

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:

Travis Miller

Name of Person

Radey Thomas Yon & Clark, P.A.

Firm/Company

301 S Bronough Street, Suite 200

Address

Tallahassee, FL 32301

City/State and Zip code

rkaplan@coniferinsurance.com

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

For further information concerning this matter, please call:

Travis Miller

Name of Person

at (850) 425-6654

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. White Pine Insurance Company

(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. Michigan

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

3. 25-1212201

(FEI number, if applicable)

4. 7/9/1969

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. N/A

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 26300 Northwestern Highway, Ste 410, Southfield, MI 48076

(Principal office address)

26300 Northwestern Highway, Ste 410, Southfield, MI 48076

(Current mailing address)

8. Insurance Company

(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: Travis L. Miller

Office Address: 301 S Bronough Street, Suite 200

Tallahassee

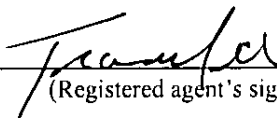
(City)

, Florida 32301

(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.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: James G. Petcoff

Address: 26300 Northwestern Highway, Ste 410
Southfield, MI 48076

Vice Chairman: _____

Address: _____

Director: Brian J. Roney

Address: 26300 Northwestern Highway, Ste 410
Southfield, MI 48076

Director: See attached

Address: _____

B. OFFICERS

President: Brian J. Roney

Address: 26300 Northwestern Hwy, Ste 410
Southfield, MI 48076

Vice President: See attached

Address: _____

Secretary: Rochelle Kaplan-Rudolph

Address: 26300 Northwestern Hwy., Ste 410, Southfield, MI 48076

Treasurer: Paul Deemer

Address: 26300 Northwestern Hwy., Ste 410, Southfield, MI 48076

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. Rochelle Kaplan-Rudolph, General Counsel / Secretary

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

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

List of Officers and Directors of White Pine Insurance Company

White Pine Insurance Company

Name	Title	Addresses
James G. Petcoff	Director	26300 Northwestern Hwy., Ste 410, Southfield, MI 48076
Joseph Sarafa	Director	11123 Bugai, Traverse City, MI 49684
Jorge Morales	Director	1451 E. Lincoln, Madison Heights, MI 48071
R. Jamison Williams, Jr.	Director	380 North Old Woodward Avenue #300 Birmingham, MI 48009
Brian J. Roney	Director / COO / President	26300 Northwestern Hwy., Ste 410, Southfield, MI 48076
Nicholas J. Petcoff	Chief Underwriting Officer	26300 Northwestern Hwy., Ste 410, Southfield, MI 48076
Andrew Petcoff	Vice President of Marketing	26300 Northwestern Hwy., Ste 410, Southfield, MI 48076
Terrance Fleckenstein	Chief Claims Officer	26300 Northwestern Hwy., Ste 410, Southfield, MI 48076
Paul B. Deemer	Chief Financial Officer / Treasurer	26300 Northwestern Hwy., Ste 410, Southfield, MI 48076
Christopher Baker	Assistant Treasurer	26300 Northwestern Hwy., Ste 410, Southfield, MI 48076
Rochelle Kaplan	Secretary	26300 Northwestern Hwy., Ste 410, Southfield, MI 48076
Marie C. McNerny	Senior Vice President	26300 Northwestern Hwy., Ste 410, Southfield, MI 48076
Allison Walter	Vice President / Assistant Secretary	26300 Northwestern Hwy., Ste 410, Southfield, MI 48076

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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As of May 17, 2012

CERTIFICATE OF COMPLIANCE

Office of Financial and Insurance Regulation

Effective Date: June 19, 2012

THIS IS TO CERTIFY, that

White Pine Insurance Company
(Michigan stock insurer)
NAIC No. 11932

is organized under the laws of this State and is authorized to issue policies and transact business under the following Sections of the Insurance Code of 1956, as amended:

Chapter 06 - Section 606 - Disability
Chapter 06 - Section 610 - Property
Chapter 06 - Section 616 - Inland Marine
Chapter 06 - Section 620 - Automobile Insurance - limited
Chapter 06 - Section 624 - SubSection 1a - Casualty: Steam Boiler, Flywheel & Machinery
Chapter 06 - Section 624 - SubSection 1b - Casualty: Automobile
Chapter 06 - Section 624 - SubSection 1b - Casualty: Liability
Chapter 06 - Section 624 - SubSection 1b - Casualty: Workers' Compensation
Chapter 06 - Section 624 - SubSection 1c - Casualty: Plate Glass
Chapter 06 - Section 624 - SubSection 1f - Casualty: Burglary and Theft
Chapter 06 - Section 624 - SubSection 1g - Casualty: Livestock
Chapter 06 - Section 624 - SubSection 1h - Casualty: Malpractice
Chapter 06 - Section 625 - Disability coverage supplemental to Auto Insurance
Chapter 06 - Section 628 - Surety & Fidelity

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TALLAHASSEE, FLORIDA



CERTIFIED COPY

June 19, 2012

Marilyn Rzepnicki

Office of Financial & Insurance Regulation