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DIVISION OF CORPORATION

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TALLAHASSEE FL 32304

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Healthcare Underwriters Group of Ohio 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:

David Yon

Name of Person

Radey Law Firm

Firm/Company

301 S. Bronough Street, Suite 200

Address

Tallahassee, FL 32301

City/State and Zip code

dyon@radeylaw.com

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

For further information concerning this matter, please call:

David Yon

Name of Person

at (850) 425-6694

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. Healthcare Underwriters Group of Ohio 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. Ohio 3. 74-3129288
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11/30/2004 5. Perpetual
(Date of incorporation) (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. 1900 Polaris Parkway, Suite 450, Columbus, OH, 43240

(Principal office address)

1900 Polaris Parkway, Suite 450, Columbus, OH, 43240

(Current mailing address)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: David Yon

Office Address: 301 S. Bronough St., Suite 200

Tallahassee, Florida 32301
(City) (Zip code)

9. 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)

10. 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.

74 OCT 10 AM 8:49
STATE
TALLAHASSEE FLORIDA

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

A. DIRECTORS

Chairman: See Attached

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: See Attached

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

12. John M. H. as Chief Executive Officer
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.

13. Joshua M. Salman, Chief Executive Officer
(Typed or printed name and capacity of person signing application)

Healthcare Underwriters Group of Ohio Inc.

Officers and Directors

1. John Michael Surso, M.D.
3780 Medina Road
Medina, OH 44256
Title: Chairperson
2. Thayne Robert Alred, M.D.
50 Quail Ridge Drive
Bentleyville, OH 44022
Title: Director
3. Howard Irwin Dickey-White, M.D.
5700 Darrow Road, #106
Hudson, OH 44236
Title: President
4. Christopher Boshkos, M.D.
411 East Market Street
Akron, OH 44304
Title: Secretary
5. Joseph James Zigray, CPA (Retired)
3027 Plumbrook
Maumee, OH 43537
Title: Treasurer
6. Joshua Marc Salman
1250 S. Pine Island Road, Suite 300
Plantation, FL 33324
Title: CEO
7. David Wayne Lester
1250 S. Pine Island Road, Suite 300
Plantation, FL 33324
Title: VP, CFO, Assistant Treasurer
8. Morton Caldwell Bell
1250 S. Pine Island Road, Suite 300
Plantation, FL 33324
Title: VP, Chief Underwriting Officer
9. William Carl Ludwig
450 Alkyre Run Drive
Westerville, OH 43082
VP, Chief Claims Officer
10. Ronald Joseph Goff
1250 S. Pine Island Road, Suite 300
Plantation, FL 33324
VP, Chief Sales & Marketing Officer

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11. Thomas William Mueller
1250 S. Pine Island Road, Suite 300
Plantation, FL 33324
Title: Director, VP of Finance-Controller
 12. David Wayne McKenney
1250 S. Pine Island Road, Suite 300
Plantation, FL 33324
Title: Director, Regional VP of Claims

UNITED STATES OF AMERICA
STATE OF OHIO
OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show HEALTHCARE UNDERWRITERS GROUP OF OHIO INC., an Ohio corporation, Charter No. 1502634, having its principal location in Columbus, County of Franklin, was incorporated on November 30, 2004 and is currently in GOOD STANDING upon the records of this office.



*Witness my hand and the seal of the
Secretary of State at Columbus, Ohio
this 10th day of October, A.D. 2014.*

Jon Husted

Ohio Secretary of State

Validation Number: 201428300658

14 OCT 10 AM 8:49
OHIO SECRETARY OF STATE
JON HUSTED
COLUMBUS, OHIO