

F1500000/593

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H15000091044 3)))



H150000910443ABCV

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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 205-8842
Fax Number : (850) 878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FOREIGN PROFIT/NONPROFIT CORPORATION
MOONGATE INSURANCE LTD. INC.

Certificate of Status	1
Certified Copy	1
Page Count	06
Estimated Charge	\$87.50

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu Corporate Filing Menu Help

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: MoonGate Insurance Ltd. 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:

Carolyn Jayne

Name of Person

K&L Gates LLP

Firm/Company

70 West Madison Street

Address

Chicago, IL 60602

City/State and Zip code

carolyn.jayne@klgates.com

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

For further information concerning this matter, please call:

Federico Candiolo

Name of Person

at (441) 294-0132

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. **MoonGate Insurance Ltd. Inc.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co." or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. **Bermuda**

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

3.

(FBI number, if applicable)

4. **July 16, 2013**

(Date of incorporation)

5.

Perpetual

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

6. **Not applicable**

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. **Crawford House, 50 Cedar Avenue, Hamilton HM11 Bermuda**

(Principal office address)

Crawford House, 50 Cedar Avenue, Hamilton HM11 Bermuda

(Current mailing address)

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

Name:

C T Corporation System

Office Address:

1200 South Pine Island Road

Plantation

(City)


. Florida

33324

(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.*



James M. Halpin
Assistant Secretary

(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.

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TALLAHASSEE, FLORIDA

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TALLAHASSEE FLORIDA

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

A. DIRECTORS

Director
~~XXXXXXXX~~

Leon L. Bascome

Address:

141 South Road

Smith's HS01 Bermuda

Director
~~Vice Chairman~~

Ronald Simmons

Address:

Palmyra, 3 Idle Acres Road

Smith's FL06 Bermuda

Director:

Derek Ratteray

Address:

6 Skyline Road

Smiths FL08 Bermuda

Director:

Neil Horner

Address:

Crawford House, 50 Cedar Avenue

Hamilton HM 11 Bermuda

B. OFFICERS

President:

Leon L. Bascome

Address:

141 South Road

Smith's H501 Bermuda

Vice President:

Not applicable

Address:

Secretary:

Compass Administration Services Ltd.

Address:

Crawford House, 50 Cedar Avenue, Hamilton HM 11 Bermuda

Treasurer:

Address:

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

12. _____

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. Leon Bascome, President and Director

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

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TALLAHASSEE, FLORIDA

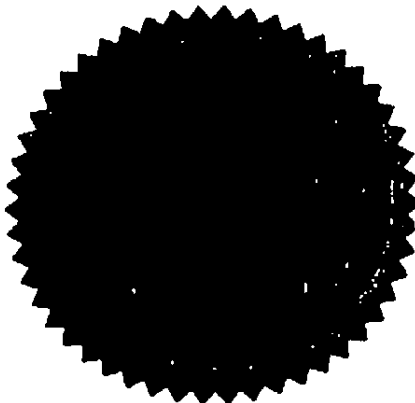
(Convention de La Haye du 5 Octobre 1961)

1. Country: United Kingdom in respect of Bermuda
This Public Document
2. Has been signed by Jeremie M. Hayward
3. Acting in the capacity of Supervisor of Registration
4. Bears the seal/stamp REGISTRAR OF COMPANIES, BERMUDA

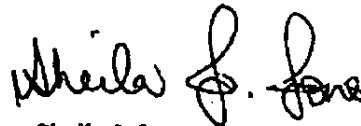
Certified

5. At Bermuda
6. On 10 April 2015
7. By the Governor and Commander-in-Chief of the Bermudas or Somers Islands or any member of his staff, signing on his behalf and using his official seal.
8. Number: 71,207

9. Seal



10. Signature:


Sheila J. Jones

For Governor and
Commander-in-Chief

If this document is to be used in a country which is not a party to the Hague Convention of 5 October 1961, it should be presented to the consular section of the mission representing that country. An apostille or legalization certificate only confirms that the signature, seal or stamp on the document is genuine. It does not mean that the contents of the document are correct or that the Parliamentary Registry Office approves of the contents.

4/14/2015 9:36:08 AM From: To: 8506176381(6/6)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
Registration No. 47948

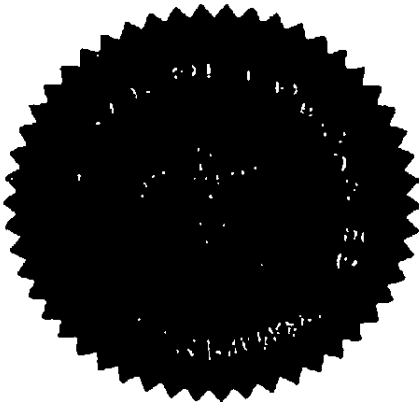


BERMUDA
MINISTRY OF ECONOMIC DEVELOPMENT
CERTIFICATE OF COMPLIANCE

I, Jeremie M Hayward, Supervisor of Registration, of the Registrar of Companies, in the Islands of Bermuda, do hereby certify that

MoonGate Insurance Ltd.

is a company duly incorporated under the laws of Bermuda and is at the date of this Certificate, in good standing under the Companies Act 1981.



Given under my hand and the Seal of the
REGISTRAR OF COMPANIES this
2nd day of April 2015

Jeremie M Hayward
Supervisor of Registration