

F15000007753

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850) 617-6383

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCAC00000023
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.****

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION
Allmerica Financial Alliance Insurance Company

Certificate of Status	0
Certified Copy	0
Page Count	22
Estimated Charge	\$70.00

RECEIVED
15 JUL 30 PM 4:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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15 JUL 30 AM 7:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help JUL 31 2015

J SHIVERS

7/30/2015 4:21:39 PM From: To: 8506176383(2/22)

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Allmerica Financial Alliance 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:

Corporate Secretary

Name of Person

The Hanover Insurance Company

Firm/Company

440 Lincoln Street

Address

Worcester, MA 01653

City/State and Zip code

corpsecy@hanover.com

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

For further information concerning this matter, please call:

Charles F. Cronin

Name of Person

at (508) 855-2319

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. Allmerica Financial Alliance 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. New Hampshire 3. 04-3272695
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 04/26/1995 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 440 Lincoln Street, Worcester, MA 01653
(Principal office address)
440 Lincoln Street, Worcester, MA 01653
(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, Florida 33324
(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.

C T Corporation System
By: Tammy Tofteroo
(Registered agent's signature) **Vice President**

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

A. DIRECTORS *SEE ATTACHMENT*

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS *SEE ATTACHMENT*

President: Frederick Henry Eppinger

Address: The Hanover Insurance Company 440 Lincoln Street E-1
Worcester, MA 01653

Vice President: Charles O. Kingsbury

Address: The Hanover Insurance Company 440 Lincoln Street
Worcester, MA 01653

Secretary: Charles Frederick Cronin

Address: The Hanover Insurance Company 440 Lincoln Street, Worcester, MA 01653

Treasurer: Andrew Christopher Furman

Address: 52 High Point Drive, North Grafton, MA 01536

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. William J. Cahill, Jr. Assistant Secretary

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

15 JUL 30 AM 7:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**Attachment to Florida
Officers & Directors**

- 1 Full Name: Richard J. Litchfield
Officer/Director: Officer
Officer's Title: Assistant Treasurer
Director's Title:
Business Address: Opus Investment Management, Inc. 440
Lincoln Street
City: Worcester
State: MA
ZIP Code: 01653
- 2 Full Name: Ann Kirkpatrick Tripp
Officer/Director: Officer
Officer's Title: Chief Investment Officer
Director's Title:
Business Address: Opus Investment Management, Inc. 440
Lincoln Street
City: Worcester
State: MA
ZIP Code: 01653
- 3 Full Name: Lisa M. Voellings
Officer/Director: Officer
Officer's Title: Assistant Vice President
Director's Title:
Business Address: The Hanover Insurance Company 440
Lincoln Street
City: Worcester
State: MA
ZIP Code: 01653
- 4 Full Name: Michael J. Billings
Officer/Director: Officer
Officer's Title: Vice President
Director's Title:
Business Address: The Hanover Insurance Company 440
Lincoln Street
City: Worcester

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TALLAHASSEE, FLORIDA

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7/30/2015 4:21:39 PM From: To: 8506176383(6/22)

	State:	MA
	ZIP Code:	01653
5	Full Name:	Joseph P. Cranny
	Officer/Director:	Officer
	Officer's Title:	Vice President
	Director's Title:	
	Business Address:	The Hanover Insurance Group 8300 Norman Center Drive Suite 250
	City:	Bloomington
	State:	MN
	ZIP Code:	55437
6	Full Name:	Michael F. Lannigan
	Officer/Director:	Officer
	Officer's Title:	Vice President
	Director's Title:	
	Business Address:	Opus Investment Management, Inc. 440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
7	Full Name:	John G. Scott
	Officer/Director:	Officer
	Officer's Title:	Vice President
	Director's Title:	
	Business Address:	The Hanover Insurance Group 333 W. Pierce Road, Suite 300
	City:	Itasca
	State:	IL
	ZIP Code:	60143
8	Full Name:	William J. Piel
	Officer/Director:	Officer
	Officer's Title:	Assistant Treasurer
	Director's Title:	
	Business Address:	Opus Investment Management, Inc. 440 Lincoln Street
	City:	Worcester

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	State:	MA
	ZIP Code:	01653
9	Full Name:	Stephen A. Marshall
	Officer/Director:	Officer
	Officer's Title:	Vice President
	Director's Title:	
	Business Address:	The Hanover Insurance Company 440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
10	Full Name:	Kristen M. Albright
	Officer/Director:	Officer
	Officer's Title:	Vice President
	Director's Title:	
	Business Address:	The Hanover Insurance Company 440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
11	Full Name:	Warren E. Barnes
	Officer/Director:	Officer
	Officer's Title:	Corporate Controller
	Director's Title:	
	Business Address:	The Hanover Insurance Company 440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
12	Full Name:	Warren E. Barnes
	Officer/Director:	Officer
	Officer's Title:	Vice President
	Director's Title:	
	Business Address:	The Hanover Insurance Company 440 Lincoln Street
	City:	Worcester

	State:	MA
	ZIP Code:	01653
13	Full Name:	Warren E. Barnes
	Officer/Director:	Officer
	Officer's Title:	Assistant Treasurer
	Director's Title:	
	Business Address:	The Hanover Insurance Company 440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
14	Full Name:	Lisa M. Binnie
	Officer/Director:	Officer
	Officer's Title:	Vice President
	Director's Title:	
	Business Address:	The Hanover Insurance Company 440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
15	Full Name:	Joseph David Freitas
	Officer/Director:	Officer
	Officer's Title:	Vice President
	Director's Title:	
	Business Address:	The Hanover Insurance Company 440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
16	Full Name:	J (Initial Only) Kendall Huber
	Officer/Director:	Officer
	Officer's Title:	Assistant Secretary
	Director's Title:	
	Business Address:	The Hanover Insurance Company 440 Lincoln Street
	City:	Worcester

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	State:	MA
	ZIP Code:	01653
17	Full Name:	Benjamin R. Rhodes
	Officer/Director:	Officer
	Officer's Title:	Vice President
	Director's Title:	
	Business Address:	The Hanover Insurance Company 440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
18	Full Name:	Patricia A. Norton-Gatto
	Officer/Director:	Officer
	Officer's Title:	Vice President
	Director's Title:	
	Business Address:	The Hanover Insurance Company 440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
19	Full Name:	David D. Sagaser
	Officer/Director:	Officer
	Officer's Title:	Vice President
	Director's Title:	
	Business Address:	The Hanover Insurance Company 440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
20	Full Name:	William J. Cahill
	Officer/Director:	Officer
	Officer's Title:	Vice President
	Director's Title:	
	Business Address:	The Hanover Insurance Company 440 Lincoln Street
	City:	Worcester

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	State:	MA
	ZIP Code:	01653
21	Full Name:	William J. Cahill
	Officer/Director:	Officer
	Officer's Title:	Group Counsel
	Director's Title:	
	Business Address:	The Hanover Insurance Company 440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
22	Full Name:	J (Initial Only) Kendall Huber
	Officer/Director:	Officer
	Officer's Title:	General Counsel
	Director's Title:	
	Business Address:	The Hanover Insurance Company 440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
23	Full Name:	Edward C. Ruhl
	Officer/Director:	Officer
	Officer's Title:	Vice President
	Director's Title:	
	Business Address:	The Hanover Insurance Company 440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
24	Full Name:	William J. Cahill
	Officer/Director:	Officer
	Officer's Title:	Assistant Secretary
	Director's Title:	
	Business Address:	The Hanover Insurance Company 440 Lincoln Street
	City:	Worcester

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	State:	MA
	ZIP Code:	01653
25	Full Name:	Gary S. Bujaucius
	Officer/Director:	Officer
	Officer's Title:	Vice President
	Director's Title:	
	Business Address:	The Hanover Insurance Company 440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
26	Full Name:	Catherine E. Eska
	Officer/Director:	Officer
	Officer's Title:	Vice President
	Director's Title:	
	Business Address:	The Hanover Insurance Company 440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
27	Full Name:	Kathleen T. Cunningham
	Officer/Director:	Officer
	Officer's Title:	Vice President
	Director's Title:	
	Business Address:	The Hanover Insurance Company 440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
28	Full Name:	Michael H. Lee
	Officer/Director:	Officer
	Officer's Title:	Clerk
	Director's Title:	
	Business Address:	The Hanover Insurance Group Bedford Springs Office Park Ten Corporate Drive, Suite 200

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	City:	Bedford
	State:	NH
	ZIP Code:	03110
29	Full Name:	Jonathan E. Brynga
	Officer/Director:	Officer
	Officer's Title:	Vice President
	Director's Title:	
	Business Address:	17 Quaddick Road
	City:	Thompson
	State:	CT
	ZIP Code:	06277
30	Full Name:	Jonathan E. Brynga
	Officer/Director:	Officer
	Officer's Title:	Chief Compliance Officer
	Director's Title:	
	Business Address:	17 Quaddick Road
	City:	Thompson
	State:	CT
	ZIP Code:	06277
31	Full Name:	J (Initial Only) Kendall Huber
	Officer/Director:	Officer
	Officer's Title:	Executive Vice President
	Director's Title:	
	Business Address:	The Hanover Insurance Company 440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
32	Full Name:	Richard W. Lavey
	Officer/Director:	Officer
	Officer's Title:	Chief Marketing & Distribution Officer
	Director's Title:	
	Business Address:	The Hanover Insurance Company 440 Lincoln Street
	City:	Worcester

State: MA
ZIP Code: 01653
33 **Full Name:** Andrew Scott Robinson
Officer/Director: Officer
Officer's Title: Executive Vice President
Director's Title:
Business Address: The Hanover Insurance Company 440
Lincoln Street
City: Worcester
State: MA
ZIP Code: 01653
34 **Full Name:** David Bruce Greenfield
Officer/Director: Officer
Officer's Title: Executive Vice President
Director's Title:
Business Address: 24 West Branch Road
City: Weston
State: CT
ZIP Code: 06883
35 **Full Name:** David Bruce Greenfield
Officer/Director: Officer
Officer's Title: Chief Financial Officer
Director's Title:
Business Address: 24 West Branch Road
City: Weston
State: CT
ZIP Code: 06883
36 **Full Name:** David Bruce Greenfield
Officer/Director: Officer
Officer's Title: Assistant Treasurer
Director's Title:
Business Address: 24 West Branch Road
City: Weston
State: CT
ZIP Code: 06883

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- 37 Full Name: Celeste J. Nelson
Officer/Director: Officer
Officer's Title: Vice President
Director's Title:
Business Address: The Hanover Insurance Company 440
Lincoln Street
City: Worcester
State: MA
ZIP Code: 01653
- 38 Full Name: Andrew Christopher Furman
Officer/Director: Officer
Officer's Title: Vice President
Director's Title:
Business Address: 52 High Point Drive
City: North Grafton
State: MA
ZIP Code: 01536
- 39 Full Name: Sheryl W. O'Connell
Officer/Director: Officer
Officer's Title: Vice President
Director's Title:
Business Address: The Hanover Insurance Company 440
Lincoln Street
City: Worcester
State: MA
ZIP Code: 01653
- 40 Full Name: Douglas Warner
Officer/Director: Officer
Officer's Title: Vice President
Director's Title:
Business Address: Citizens Insurance Company 808 Highlander
Way
City: Howell
State: MI
ZIP Code: 48843

- 41 Full Name: Scott C. Hyney
Officer/Director: Officer
Officer's Title: Vice President
Director's Title:
Business Address: Opus Investment Management, Inc. 440
Lincoln Street
City: Worcester
State: MA
ZIP Code: 01653
- 42 Full Name: Ann Kirkpatrick Tripp
Officer/Director: Officer
Officer's Title: Senior Vice President
Director's Title:
Business Address: Opus Investment Management, Inc. 440
Lincoln Street
City: Worcester
State: MA
ZIP Code: 01653
- 43 Full Name: Christine Bilotti Peterson
Officer/Director: Officer
Officer's Title: Chief Human Resource Officer
Director's Title:
Business Address: 440 Lincoln Street
City: Worcester
State: MA
ZIP Code: 01653
- 44 Full Name: Christine Bilotti Peterson
Officer/Director: Officer
Officer's Title: Senior Vice President
Director's Title:
Business Address: 440 Lincoln Street
City: Worcester
State: MA
ZIP Code: 01653
- 45 Full Name: William J. Piel

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	Officer/Director:	Officer
	Officer's Title:	Vice President
	Director's Title:	
	Business Address:	Opus Investment Management, Inc. 440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
46	Full Name:	Mark Leo Berthiaume
	Officer/Director:	Officer
	Officer's Title:	Senior Vice President
	Director's Title:	
	Business Address:	440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
47	Full Name:	Mark Leo Berthiaume
	Officer/Director:	Officer
	Officer's Title:	Chief Administration Officer
	Director's Title:	
	Business Address:	440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
48	Full Name:	Jason M. Dana
	Officer/Director:	Officer
	Officer's Title:	Vice President
	Director's Title:	
	Business Address:	
	City:	
	State:	
	ZIP Code:	
49	Full Name:	Anna U. Feinhaus
	Officer/Director:	Officer
	Officer's Title:	Vice President

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Director's Title:
Business Address:
City:
State:
ZIP Code:

50 Full Name: Richard W. Lavey
Officer/Director: Officer
Officer's Title: Executive Vice President
Director's Title:
Business Address: The Hanover Insurance Company 440
Lincoln Street
City: Worcester
State: MA
ZIP Code: 01653

51 Full Name: John Conner Roche
Officer/Director: Officer
Officer's Title: Executive Vice President
Director's Title:
Business Address: The Hanover Insurance Company 440
Lincoln Street
City: Worcester
State: MA
ZIP Code: 01653

52 Full Name: Cheryl A. Bellantoni
Officer/Director: Officer
Officer's Title: Assistant Treasurer
Director's Title:
Business Address:
City:
State:
ZIP Code:

53 Full Name: Thomas A. Rush
Officer/Director: Officer
Officer's Title: Chief Anti-Money Laundering Officer
Director's Title:

	Business Address:	The Hanover Insurance Company 440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
54	Full Name:	Frederick Henry Eppinger
	Officer/Director:	Director
	Officer's Title:	
	Director's Title:	Director
	Business Address:	The Hanover Insurance Company 440 Lincoln Street E-1
	City:	Worcester
	State:	MA
	ZIP Code:	01653
55	Full Name:	J (Initial Only) Kendall Huber
	Officer/Director:	Director
	Officer's Title:	
	Director's Title:	Director
	Business Address:	The Hanover Insurance Company 440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
56	Full Name:	John Conner Roche
	Officer/Director:	Director
	Officer's Title:	
	Director's Title:	Director
	Business Address:	The Hanover Insurance Company 440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
57	Full Name:	David Bruce Greenfield
	Officer/Director:	Director
	Officer's Title:	
	Director's Title:	Director

Business Address: 24 West Branch Road
City: Weston
State: CT
ZIP Code: 06883

58 **Full Name:** Joseph David Freitas
Officer/Director: Director
Officer's Title:
Director's Title: Director
Business Address: The Hanover Insurance Company 440
Lincoln Street
City: Worcester
State: MA
ZIP Code: 01653

59 **Full Name:** Mark Joseph Welzenbach
Officer/Director: Director
Officer's Title:
Director's Title: Director
Business Address: The Hanover Insurance Company 440
Lincoln Street
City: Worcester
State: MA
ZIP Code: 01653

60 **Full Name:** Andrew Christopher Furman
Officer/Director: Director
Officer's Title:
Director's Title: Director
Business Address: 52 High Point Drive
City: North Grafton
State: MA
ZIP Code: 01536

61 **Full Name:** Ann Kirkpatrick Tripp
Officer/Director: Director
Officer's Title:
Director's Title: Director

	Business Address:	Opus Investment Management, Inc. 440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
62	Full Name:	Christine Bilotti Peterson
	Officer/Director:	Director
	Officer's Title:	
	Director's Title:	Director
	Business Address:	440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
63	Full Name:	Frederick Henry Eppinger
	Officer/Director:	Director
	Officer's Title:	
	Director's Title:	Director
	Business Address:	The Hanover Insurance Company 440 Lincoln Street E-1
	City:	Worcester
	State:	MA
	ZIP Code:	01653
64	Full Name:	Mark Leo Berthiaume
	Officer/Director:	Director
	Officer's Title:	
	Director's Title:	Director
	Business Address:	440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653

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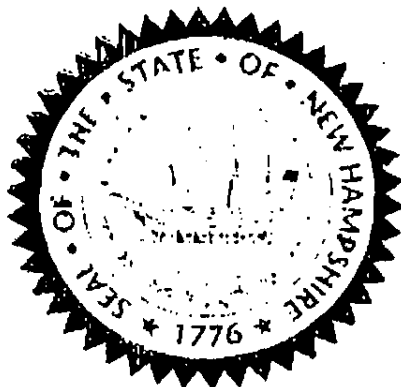
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State of New Hampshire
Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify ALLMERICA FINANCIAL ALLIANCE INSURANCE COMPANY is a New Hampshire corporation registered on April 26, 1995. I further certify that articles of dissolution have not been filed with this office.

INFORMATION REGARDING ANNUAL REPORTS AND/OR FEES MUST BE
OBTAINED FROM THE NEW HAMPSHIRE INSURANCE DEPARTMENT.



In TESTIMONY WHEREOF, I hereto
set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 30th day of July, A.D. 2015

A handwritten signature in cursive script, appearing to read "William M. Gardner".

William M. Gardner
Secretary of State