

F/5000003716

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.

((H15000202217 3)))



H150002022173ABCU

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 : FCA000000023
Phone : (850)205-8842
Fax Number : (850)878-5368

2015 AUG 21 AM 10:34
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

****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

AIX, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	11
Estimated Charge	\$70.00

RECEIVED
15 AUG 21 AM 10:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY
EXAMINER
AUG 24 2015

8/21/2015 10:39:51 AM From: To: 8506176383(2/11)

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: AIX, 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:

Arleen Simons

Name of Person

The Hanover Insurance Group

Firm/Company

440 Lincoln Street, N435

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:

Arleen Simons

Name of Person

at (

508

) 866-3428

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. AIX, 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. Delaware

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

3. 20-3051651

(FEI number, if applicable)

4. 06/23/2005

(Date of incorporation)

5. Perpetual

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

6. 01/25/2007

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

7. 5 WATERSIDE CROSSING, WINDSOR, CT 06095

(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

(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.

By: 

(Registered agent's signature)

Lauren H. Krentz
Special Assistant
Secretary

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.

FILED
2015 AUG 21 AM 10:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
2015 AUG 21 AM 10:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Robert D. Schultz

Address: 5 WATERSIDE CROSSING

WINDSOR, CT 06095

Vice President: Lisa M. Binnie

Address: 440 Lincoln Street

Worcester, MA 01653

Secretary: Charles F. Cronin

Address: 440 Lincoln Street, Worcester, MA 01653

Treasurer: Andrew C. Furman

Address: 440 Lincoln Street, Worcester, MA 01653

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

12. RD Schultz

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. Robert D. Schultz, President

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

FILED
2015 AUG 21 AM 10:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**Attachment to Florida
Officers & Directors**

- 1 Full Name: J. Kendall Huber
 Officer/Director: Officer
 Officer's Title: Assistant Secretary
 Director's Title:
 Business Address: 440 Lincoln Street
 City: Worcester
 State: MA
 ZIP Code: 01653
- 2 Full Name: Charles O. Kingsbury
 Officer/Director: Officer
 Officer's Title: Vice President
 Director's Title:
 Business Address: 440 Lincoln Street
 City: Worcester
 State: MA
 ZIP Code: 01653
- 3 Full Name: Warren E. Barnes
 Officer/Director: Officer
 Officer's Title: Vice President
 Director's Title:
 Business Address: 440 Lincoln Street
 City: Worcester
 State: MA
 ZIP Code: 01653
- 4 Full Name: Warren E. Barnes
 Officer/Director: Officer
 Officer's Title: Corporate Controller
 Director's Title:
 Business Address: 440 Lincoln Street
 City: Worcester
 State: MA
 ZIP Code: 01653
- 5 Full Name: Scott C. Hyney

FILED
2015 AUG 21 AM 10:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

	Officer/Director:	Officer
	Officer's Title:	Vice President
	Director's Title:	
	Business Address:	440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
6	Full Name:	Alan F. Joachim
	Officer/Director:	Officer
	Officer's Title:	Vice President
	Director's Title:	
	Business Address:	440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
7	Full Name:	Ann K. Tripp
	Officer/Director:	Officer
	Officer's Title:	Chief Investment Officer
	Director's Title:	
	Business Address:	440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
8	Full Name:	Richard J. Litchfield
	Officer/Director:	Officer
	Officer's Title:	Vice President
	Director's Title:	
	Business Address:	440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
9	Full Name:	Charles O. Kingsbury
	Officer/Director:	Officer
	Officer's Title:	Assistant Corporate Controller
	Director's Title:	

FILED
2015 AUG 21 AM 10:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Business Address:	440 Lincoln Street
City:	Worcester
State:	MA
ZIP Code:	01653
10 Full Name:	Jonathan E. Brynga
Officer/Director:	Officer
Officer's Title:	Vice President
Director's Title:	
Business Address:	440 Lincoln Street
City:	Worcester
State:	MA
ZIP Code:	01653
11 Full Name:	Jonathan E. Brynga
Officer/Director:	Officer
Officer's Title:	Chief Compliance Officer
Director's Title:	
Business Address:	440 Lincoln Street
City:	Worcester
State:	MA
ZIP Code:	01653
12 Full Name:	J. Kendall Huber
Officer/Director:	Officer
Officer's Title:	General Counsel
Director's Title:	
Business Address:	440 Lincoln Street
City:	Worcester
State:	MA
ZIP Code:	01653
13 Full Name:	J. Kendall Huber
Officer/Director:	Officer
Officer's Title:	Executive Vice President
Director's Title:	
Business Address:	440 Lincoln Street
City:	Worcester
State:	MA

FILED
2015 AUG 21 AM 10:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

	ZIP Code:	01653
14	Full Name:	David B. Greenfield
	Officer/Director:	Officer
	Officer's Title:	Assistant Treasurer
	Director's Title:	
	Business Address:	440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
15	Full Name:	David B. Greenfield
	Officer/Director:	Officer
	Officer's Title:	Chief Financial Officer
	Director's Title:	
	Business Address:	440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
16	Full Name:	David B. Greenfield
	Officer/Director:	Officer
	Officer's Title:	Executive Vice President
	Director's Title:	
	Business Address:	440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
17	Full Name:	Andrew C. Furman
	Officer/Director:	Officer
	Officer's Title:	Vice President
	Director's Title:	
	Business Address:	440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653
18	Full Name:	Michael F. Lannigan
	Officer/Director:	Officer

FILED
2015 AUG 21 AM 10:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Officer's Title:	Vice President
Director's Title:	
Business Address:	440 Lincoln Street
City:	Worcester
State:	MA
ZIP Code:	01653
19 Full Name:	Anna U. Feinhaus
Officer/Director:	Officer
Officer's Title:	Vice President
Director's Title:	
Business Address:	440 Lincoln Street
City:	Worcester
State:	MA
ZIP Code:	01653
20 Full Name:	Ann K. Tripp
Officer/Director:	Officer
Officer's Title:	Senior Vice President
Director's Title:	
Business Address:	440 Lincoln Street
City:	Worcester
State:	MA
ZIP Code:	01653
21 Full Name:	Cheryl A. Bellantoni
Officer/Director:	Officer
Officer's Title:	Assistant Treasurer
Director's Title:	
Business Address:	440 Lincoln Street
City:	Worcester
State:	MA
ZIP Code:	01653
22 Full Name:	Andrew S. Robinson
Officer/Director:	Director
Officer's Title:	
Director's Title:	Director
Business Address:	440 Lincoln Street

8/21/2015 10:39:51 AM From: To: 8506176383(10/11)

FILED
2015 AUG 21 AM 10:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

	City:	Worcester
	State:	MA
	ZIP Code:	01653
23	Full Name:	Robert D. Schultz
	Officer/Director:	Director
	Officer's Title:	
	Director's Title:	Director
	Business Address:	5 Waterside Crossing, Suite 201
	City:	Windsor
	State:	CT
	ZIP Code:	06095
24	Full Name:	David B. Greenfield
	Officer/Director:	Director
	Officer's Title:	
	Director's Title:	Director
	Business Address:	440 Lincoln Street
	City:	Worcester
	State:	MA
	ZIP Code:	01653

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AIX, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTIETH DAY OF AUGUST, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

FILED
2015 AUG 21 AM 10:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3990706 8300

151198213

You may verify this certificate online
at corp.delaware.gov/authver.shtml



Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 2663592

DATE: 08-20-15