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DEC 0 8 2015 S. YOUNG CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195	
REFERENCE : 901310 7955036	
AUTHORIZATION : Spelle le man	
COST LIMIT : \$ 7.0'.00	
ORDER DATE : December 7, 2015	
ORDER TIME : 3:46 PM	
ORDER NO. : 901310-005	
CUSTOMER NO: 7955036	
	. <u>Fg</u>
FOREIGN FILINGS	ESSAT LARY LARY LARY
NAME: HISCOX SPECIAL RISKS AGENCY (AMERICAS) INC.	FILED  DEC -7 M 9:06  RETARY OF STATE ALLASSEE, FLORIDA
XXXX QUALIFICATION (TYPE: CO)	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING	
CONTACT PERSON: Courtney Williams EXT# 62935	

EXAMINER:

## **COVER LETTER**

TO: Registration Section Division of Corpora				
Hiscox Special SUBJECT:	Risks Agency (Americas)	Inc.		
	Name of corporation	on - must include suffix		<del></del>
Dear Sir or Madam:				
The enclosed "Application b "Certificate of Existence," o above referenced foreign cor	r "Certificate of Good St	anding" and check are sul		
Please return all corresponde	ence concerning this mat	ter to the following:		
Michael Baker				
	Name c	of Person		
Hiscox Inc.				
	Firm/Co	ompany	T'S	
104 S Michigan Ave., Suite 60	)	•	ÉS	ப <u>ி</u>
	Add	lress		8 1
Chicago, IL 60603				-7
	City/State	and Zip code		
michael.baker@hiscox.com			<u>~~</u>	က်
E-	mail address: (to be used	l for future annual report	notification)	
For further information conc	erning this matter, please	e call:		<i>3,</i>
Michael Baker	630 at (	315-7723		
Name of Person	Area Co	ode Daytime Telep	phone Number	
STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 323	ions ter Circle	MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	
Enclosed is a check for the f	ollowing amount:			
□ \$70.00 Filing Fee □	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing F Certificate of S Certified Copy	Status &

## 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. Hiscox Special Risks Agency (Americas) 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. (State or country under the law of which it is incorporated (FEI number, if applicable) June 18, 2015 (Date of duration, if other than perpetual) (Date of incorporation) 6. (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 1001 Brickell Bay Drive, Suite 1804, Miami, FL 33131 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee . Florida (City) 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. Courtney Williams Corporation Service Company Asst. Vice President By:

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.

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

A. DIRI	ECTORS Police		
Chairman			
Address:	1001 Brickell Bay Drive, Suite 1804, Miami, FL 33131		
Vice Chai	irman:		
Address:			
	Elman Myers		
	1001 Brickell Bay Drive, Suite 1804, Miami, FL 33131		
Address:			
Director:	Elizabth Prior		
	1001 Brickell Bay Drive, Suite 1804, Miami, FL 33131		
B. OFFI	ICERS	ZE SE	
President:	Robert Davies		
	1001 Brickell Bay Drive, Suite 1804, Miami, FL 33131	<b>おた</b>	=
·		द्वीति बाह्य	
Vice Presi	Elman Myers	SZ &	
	1001 Brickell Bay Drive, Suite 1804, Miami, FL 33131	DA DA	
Address.	, , , , , , , , , , , , , , , , , , , ,		
Secretary:	Gavin Watson		
	520 Madison Ave., 32nd Floor, New York, NY 10022		
Treasurer:	Elizabeth Prior		
	1001 Brickell Bay Drive, Suite 1804, Miami, FL 33131		
Address:		112 1 07 1/ 1/	
NOTE: . 12.	If necessary, you may attach an addendum to the application listing	additional officers and/or directors.	
	Signature of Director or Officer		
	cer or director signing this document (and who is listed in number 11 and that he or she is aware that false information submitted in a docu		
a third de	egree felony as provided for in s.817.155, F.S.	•	
13. <u>Gavi</u>	in Watson, Secretary  (Typed or printed name and conscitu of person significant)		

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "HISCOX SPECIAL RISKS AGENCY

(AMERICAS) 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

SEVENTH DAY OF DECEMBER, 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 SAID "HISCOX SPECIAL RISKS AGENCY (AMERICAS) INC." WAS INCORPORATED ON THE EIGHTEENTH DAY OF JUNE, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVES

at corp delaware sov/au

Authentication: 10561111

Date: 12-07-15

5769438 8300 SR# 20151228610