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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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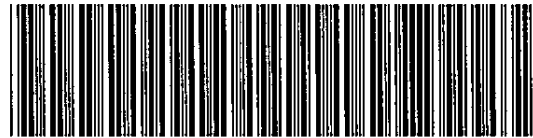
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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03/31/17--01029--006 **78.75

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RECEIVED
OFFICE OF STATE
REGISTRATION

W17-20033

APR 20 2017
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: U. S. Underwriters 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:

Mary Ellen F. Pina

Name of Person

United States Liability Insurance Company

Firm/Company

1190 Devon Park Dr.

Address

Wayne, PA 19087

City/State and Zip code

mpina@usli.com

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

For further information concerning this matter, please call:

Mary Ellen F. Pina

Name of Person

at (888)

Area Code

523-5545 x 2216

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 4, 2017

MARY ELLEN F PINA
1190 DEVON PARK DR
WAYNE, PA 19087

SUBJECT: U.S. UNDERWRITERS INSURANCE COMPANY
Ref. Number: W17000028233

We have received your document for U.S. UNDERWRITERS INSURANCE COMPANY and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

Seal is missing on Certificat of Good Standing.,

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 617A00006395

2017 APR 18 PM 12:50

OFFICE OF THE SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
17 APR 18 AM 11:22

**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. U.S. Underwriters 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. North Dakota

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

3. 23-2049904

(FEI number, if applicable)

4. 01/10/1972

(Date of incorporation)

5. _____

(Date of duration, if other than 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. 1190 Devon Park Drive, P.O. Box 6700, Wayne, PA 19087

(Principal office address)

(Current mailing address, if different)

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

Name Benjamin L. Bedard, Esq., Roberts, Reynolds, Bedard & Tuzzio, P.A.

Office Address: 470 Columbia Dr., Bldg. C-101

West Palm Beach

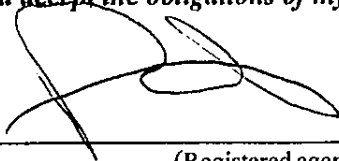
(City)

, Florida 33409

(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.

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CLERK OF STATE
17 APR 19 AM 11:22

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

A. DIRECTORS

Chairman: Thomas Patrick Nerney

Address: 1190 Devon Park Dr., P.O. Box 6700, Wayne, PA 19087

Director: Lisa Kathleen Kuesel Traynor

Address: 1190 Devon Park Dr., P.O. Box 6700, Wayne, PA 19087

Director: Reiner Ralf Mauer

Address: 1190 Devon Park Dr., P.O. Box 6700, Wayne, PA 19087

Director: Andrew Michael Mitala

Address: 1190 Devon Park Dr., P.O. Box 6700, Wayne, PA 19087

PLEASE SEE ADDENDUM FOR ADDITIONAL DIRECTORS

B. OFFICERS

President and CEO: Thomas Patrick Nerney

Address: 1190 Devon Park Dr., P.O. Box 6700, Wayne, PA 19087

Executive Vice President and COO: Lisa Kathleen Kuesel Traynor

Address: 1190 Devon Park Dr., P.O. Box 6700, Wayne, PA 19087

Secretary, EVP and Chief Compliance Officer: John Richard Petersen, Jr.

Address: 1190 Devon Park Dr., P.O. Box 6700, Wayne, PA 19087

Treasurer, EVP and CFO: Louis Francis Rivituso

Address: 1190 Devon Park Dr., P.O. Box 6700, Wayne, PA 19087

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

PLEASE SEE ADDENDUM FOR ADDITIONAL OFFICERS

12. 

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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. John Richard Petersen, Jr., Executive Vice President, Secretary and Chief Compliance Officer

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

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DIVISION OF INFORMATION
17 APR 18 AM 11:22

ADDENDUM TO U.S. UNDERWRITERS INSURANCE COMPANY'S
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA

A. DIRECTORS (cont'd)

Director: Thomas Christopher Snyder

Address: 1190 Devon Park Dr., P.O. Box 6700, Wayne, PA 19087

Director: Jack Thomas Carballo

Address: 1190 Devon Park Dr., P.O. Box 6700, Wayne, PA 19087

Director: Diane Symnoski Duda

Address: 1190 Devon Park Dr., P.O. Box 6700, Wayne, PA 19087

Director: John Richard Petersen, Jr.

Address: 1190 Devon Park Dr., P.O. Box 6700, Wayne, PA 19087

Director: Louis Francis Rivituso

Address: 1190 Devon Park Dr., P.O. Box 6700, Wayne, PA 19087

Director: John Gerald Donahue, Jr.

Address: 1190 Devon Park Dr., P.O. Box 6700, Wayne, PA 19087

B. OFFICERS (cont'd)

President, Property & Casualty Division: Reiner Ralf Mauer

Address: 1190 Devon Park Dr., P.O. Box 6700, Wayne, PA 19087

President, Specialty Lines Division: Andrew Michael Mitala

Address: 1190 Devon Park Dr., P.O. Box 6700, Wayne, PA 19087

President, Customer Distribution Wholesale & Retail Divisions: Thomas Christopher Snyder

Address: 1190 Devon Park Dr., P.O. Box 6700, Wayne, PA 19087

EVP and Chief Administration Officer: Jack Thomas Carballo

Address: 1190 Devon Park Dr., P.O. Box 6700, Wayne, PA 19087

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EVP and Chief Actuarial Officer: Diane Symnoski Duda

Address: 1190 Devon Park Dr., P.O. Box 6700, Wayne, PA 19087

Senior VP, Controller: Steven John Rivituso

Address: 1190 Devon Park Dr., P.O. Box 6700, Wayne, PA 19087

Senior VP, Claims: James William Scalise

Address: 1190 Devon Park Dr., P.O. Box 6700, Wayne, PA 19087

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17 APR 18 AM 11:22

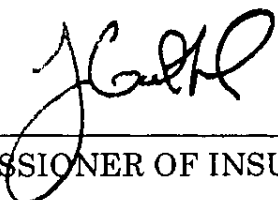
Certificate of Good Standing

I certify that *U.S. Underwriters Insurance Company* is a property and casualty insurance company with a valid certificate of authority to transact *Accident & Health, Property and Casualty* lines of insurance business in the state of *North Dakota*.

At the time of this certificate, *U.S. Underwriters Insurance Company* is not subject to any impairment or insolvency proceedings and is in good standing with the *North Dakota Insurance Department*.

IN WITNESS WHEREOF, I have hereunto set my hand and caused my official seal to be affixed, at the City of Bismarck, this *24th* day of *March*, 2017.





COMMISSIONER OF INSURANCE