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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

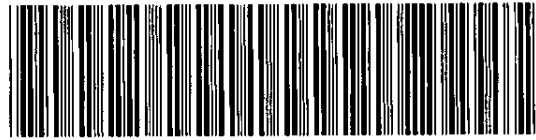
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY

JUN 27 2017

COVER LETTER

TO: Registration Section
Division of Corporations

Compass Specialty Insurance Risk Retention Group, Inc.

SUBJECT: _____
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:

Edith Giordano

_____	Name of Person
Captive Planning Associates, LLC	
_____	Firm/Company
525 Route 73 North, Ste, 218	
_____	Address
Marlton, NJ 08053	
_____	City/State and Zip code
egiordano@captiveplanning.com	
_____	E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tony Greer	615	620-1720
_____	at (_____)	_____
Name of Person	Area Code	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

**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.*

Compass Specialty Insurance Risk Retention Group, Inc.

1. _____
(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)
Tennessee 47-5256891

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

02/27/2015 4. ☒ 5. _____
(Date of incorporation) (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)

150 Fourth Avenue N., Ste 1100, Nashville, TN 37219

7. _____
(Principal office address)

(Current mailing address, if different)

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

Name: United States Corporation Agents, Inc.

Office Address: 13302 Winding Oak Court, Suite A

Tampa, FL 33612
(City) , Florida (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.



Cheyenne Moseley, Asst. Secretary on behalf of United States Corporation Agents, Inc.

(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

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

A. DIRECTORS

Chairman: Roy Dobrasinovic

Address: 115 W 55th St., Ste 201, Clarendon Hills, IL 60514

Vice Chairman:

Address:

Director: Daliborka Savovic

Address: 115 W 55th St., Ste 201, Clarendon Hills, IL 60514

Director: Arnold Edward Curtis, Jr.

Address: 3011 Armory Drive, #250, Nashville, TN 37204

B. OFFICERS

President: Roy Dobrasinovic

Address: 115 W 55th St., Ste 201, Clarendon Hills, IL 60514

Vice President:

Address:

Secretary: Angelia Demkovic

Address: 115 W 55th St., Ste 201, Clarendon Hills, IL 60514

Treasurer: Ana Aleksandrovska

Address: 115 W 55th St., Ste 201, Clarendon Hills, IL 60514

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 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. Angelia Demkovic, Secretary

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Tre Hargett
Secretary of State

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**Division of Business Services
Department of State**

State of Tennessee
312 Rosa L. Parks AVE, 6th FL
Nashville, TN 37243-1102

June 15, 2017

DICKINSON WRIGHT
KEVIN DOHERTY
1401
424 CHURCH ST
NASHVILLE, TN 37219

Request Type: Certificate of Existence/Authorization
Request #: 0241433

Issuance Date: 06/15/2017
Copies Requested: 1

Document Receipt

Receipt #: 003427247 Filing Fee: \$20.00
Payment-Credit Card - State Payment Center - CC #: 3704499786 \$20.00

Regarding: Compass Specialty Insurance Risk Retention Group, Inc.
Filing Type: For-profit Corporation - Domestic Control #: 790428
Formation/Qualification Date: 02/27/2015 Date Formed: 02/27/2015
Status: Active Formation Locale: TENNESSEE
Duration Term: Perpetual Inactive Date:
Business County: DAVIDSON COUNTY

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

Compass Specialty Insurance Risk Retention Group, Inc.

- * is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;
- * has paid all fees, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- * has filed the most recent annual report required with this office;
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett

Tre Hargett
Secretary of State

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