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(Requestor's Name)				
(Address)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
ertified Copies Certificates of Status				
Special Instructions to Filing Officer.				
Call when				
Done 3				

Office Use Only



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October 23, 2017

VIA HAND DELIVERY: Registration Section

Department of State Division of Corporations Certification Section P.O. Box 6327 Tallahassee, FL 32314

This office represents Universal North America Insurance Company and is filing the attached Application by Foreign Corporation for Authorization to Transact Business in Florida.

Please find the attached check for \$78.75 for the filing fee and Certificate of Status. The return documents will be picked up in person. Please contact Vicki Brinkley as 850-577-0398. Otherwise the return address is as follows:

Jeff Rainey - Colodny Fass 215 South Monroe Street, Suite 701 Tallahassee, FL 32301

> Jeff Rainey Colodny Fass

Sincerely

"From the Capital to the Courthouse" 144

COVER LETTER

TO: Registration Section Division of Corporations		
Universal North Ame SUBJECT:	rica Insurance Compa	uny
	Name of corporatio	n - must include suffix
Dear Sir or Madam;		
The enclosed "Application by Fore "Certificate of Existence," or "Cer above referenced foreign corporati	tificate of Good Sta	"Authorization to Transact Business in Florida." Inding" and check are submitted to register the ess in Florida.
Please return all correspondence co Richard J. Urra	oncerning this matte	er to the following:
	Name of	Person
Universal North America Insurance C	onipany	
101 Paramount Drive Suite 220	Firm/Cor	npany
	Addr	ess
Sarasota, FL, 34232		
rurra@uihna.com	City/State :	and Zip code
E-mail a	ddress; (to be used	for future annual report notification)
For further information concerning	this matter, please	ealt:
Hector N. Cora	94] at (378-8851 Ext 6534
Name of Person	Area Cod	e Daytime Telephone Number
STREET/COURIER ADI Registration Section Division of Corporations Clifton Building 2661 Executive Center Circ Tallahassee, FL 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the followin	g amount:	
	Filing Fee & — — — — — — — — — — — — — — — — — —	S78.75 Filing Fee & S87.50 Filing Fee. Certified Copy Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	h America Insurance Company		
(Enter name of c "fnc.," "Co.," "C	corporation; must include "INCORPORATED, lorp," "Inc," "Co," or "Corp,")	" "COMPANY," "CORPORATIO)N."
			1
(II name unavail Texas	able in Florida, enter alternate corporate name	דבטברת מח	ļ .
	ry under the law of which it is incorporated)	20-3073837 (FEI number, if a	
Dagambar 19 1	1007		ipplicable)
·	of incorporation) 5.	Perpetual (Date of duration, if other	
(Date	e of incorporation)	(Date of duration, if other	er than perpetual)
· 	not applicable		1
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.1.1	n Florida, if prior to registration) 502 F.S. to determine penalty liab	iliry)
4300 Centreway	Place, Suite 150, Arlington, Texas 76018	2020 and to determine penalty had	inty)
·	/ Princip	val office address)	
101 Paramount I	Orive, Suite 220, Sarasota, Florida, 34232	an office address)	
	(C		ļ.
	ICurrent mann	to address, if differents	i
	i Current mann	ig address, if different)	
. Name and stree			
	et address of Florida registered agent: (P.C Chief Financial Officer, State of Florida		
. Name and <u>stree</u> Name:	et address of Florida registered agent: (P.C Chief Financial Officer, State of Florida		٠. ز.
	<u>st address</u> of Florida registered agent: (P.O		
Name:	t address of Florida registered agent: (P.C Chief Financial Officer, State of Florida 200 East Gaines Street	D. Box <u>NOT</u> acceptable) 32301	1.7
Name:	et address of Florida registered agent: (P.C Chief Financial Officer, State of Florida 200 East Gaines Street Taflahassee	D. Box <u>NOT</u> acceptable) Florida	11.2 1.3 2.73
Name: ffice Address:	ct address of Florida registered agent: (P.C. Chief Financial Officer, State of Florida 200 East Gaines Street Taflahassee (City)	D. Box <u>NOT</u> acceptable) 32301	7 112 LCJ 277 2
Name: ffice Address: Registered age	ct address of Florida registered agent: (P.C. Chief Financial Officer, State of Florida 200 East Gaines Street Tallahassee (City)	D. Box <u>NOT</u> acceptable) Florida 32301 (Zip code)	· 7
Name: Office Address: Registered agentaing been nam	ct address of Florida registered agent: (P.C. Chief Financial Officer, State of Florida 200 East Gaines Street Tallahassee (City) ent's acceptance: end as registered agent and to accept serve	D. Box NOT acceptable) Florida	y () ed corporation at the
Name: ffice Address: Registered age aving been namesignated in this orther agree to contact the second cont	ct address of Florida registered agent: (P.C. Chief Financial Officer, State of Florida 200 East Gaines Street Tallahassee (City) ent's acceptance: red as registered agent and to accept serve application. I hereby accept the appointmomply with the provisions of all statutes r	D. Box NOT acceptable) Florida 32301 (Zip code) ice of process for the above statement as registered agent and agelative to the proper and comp	ed corporation at the pree to act in this capa lete performance of m
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H. Names and business addresses of officers and/or directors:	; }
A. DIRECTORS	
Monique Miranda Jhairman:	
Address: 4300 Centerway PL Suite 150, Arlington, TX, 76018	
√ice Chairman:	
Address:	
Josely Vega Director:	
4300 Centreway PI Suite 150, Arlington, TX, 76018 Address:	
Jose Medina Director:	
4300 Centreway PI, Suite 150, Arkington, TX, 76018	
(See Addendum with additional list of Directors and Officers)	
B. OFFICERS Miguel Barrales resident:	
4300 Centerway PI, Suite 150, Arlington, TX, 76018	
fice President:	
ddress: 101 Paramount Drive Suite 220, Sarasota, FL, 34232	32.
Josely Vega ecretary:	
ddress: 4300 Centreway PI, Suite 150, Arlington, TX, 76018	
Roberto Martinez reasurer:	
4300 Centreway Pl Suite 150, Arlington, TX, 76018 (See Addendum with address:	lditional list of Directors and Officers)
Signiture of Director or Officer he officer or director signing this document (and who is listed in number 11 al re true and that he or she is aware that false information submitted in a docume third degree felony as provided for in s.817.155, F.S.	bove) affirms that the facts stated herein
Miguel Barrales, President, UNAIC	
(Typed or printed name and capacity of person signing	application)

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

A. DIRECTORS

Director: Jose Medina Cardona

Address: 4300 Centreway PI Suite 150, Arlington, TX, 76018

Director: Jorge Amadeo

Address: 4300 Centreway PI Suite 150, Arlington, TX, 76018

Director: Waldemar Fabery Villaespesa

Address: 4300 Centreway PI Suite 150, Arlington, TX, 76018

Director: Agustin Gutierrez Aja

Address: 4300 Centreway PI Suite 150, Arlington, TX, 76018

B. OFFICERS

Vice President: Katherine Moore

Address: 4300 Centreway Pl Suite 150, Arlington, TX, 76018

Vice President: James R. Watje

Address: 4300 Centreway PI Suite 150, Arlington, TX, 76018

Vice President: Gadiel Cardona

Address: 4300 Centreway Pl Suite 150, Arlington, TX, 76018

Vice President: Gretchen Hopkins

Address: 4300 Centreway PI Suite 150, Arlington, TX, 76018

Vice President: Osvaldo Miranda

Address: 4300 Centreway PI Suite 150, Arlington, TX, 76018



Texas Department of Insurance

Financial Regulation Division - Company Licensing and Registration (103-CL) 333 Guadalupe, Austin, Texas 78701 * PO Box 149104, Austin, Texas 78714-9104 (512) 676-6400 | F: (512) 490-1035 | (866) 554-4926 | TDI.texas.gov | @TexasTDI

September 15, 2017

Jeff Rainey Colodny Fass 215 S Monroe St., Suite 701 Tallahassee, FL 32301

RE: Letter of Good Standing for Universal North America Insurance Company

Dear Jeff:

Universal North America Insurance Company has requested that the Texas Department of Insurance issue a Letter of Good Standing in relation to the company's license as an insurer in the state of Texas. In response to this request, the Texas Department of Insurance herby confirms the following:

- 1. Universal North America Insurance Company has been licensed in the state of Texas since June 28, 2005.
- 2. Universal North America Insurance Company is licensed as a fire and casualty company in the state of Texas.
- 3. Universal North America Insurance Company's Texas certificate of authority is in full effect and will remain in full effect until it is revoked, canceled or suspended. See attachment.
- 4. Universal North America Insurance Company reported a capital and surplus of \$75,339,874 as of December 31, 2016 on the company's latest annual statement. This amount is in excess of the required statutory minimum.

None of the information above may be construed as to limit or prevent the Texas Department of Insurance's ability to initiate or take action, under applicable law, for any violation of the Texas Insurance Code or related regulations.

If there are any further questions or concerns, please let me know. I can be reached at \$12-676-6375 or CompanyLicense@tdi.texas.gov.

incerely,

ff Hunt, Director

impany Licensing and Registration Office

ancial Regulation Division

cas Department of Insurance

Texas Department of Insurance Amended Certificate of Authority

License no. 96008

Licensed since: June 28, 2005

Department Certification

Universal North America Insurance Company (domestic stock fire and casualty company) organized under the laws of the state of Texas

This entity has complied with the laws of the state of Texas, as applicable, and is authorized to transact the following lines of insurance:

Allied Coverages, Auto Physical Damage, Automobile Liability, Burglary & Theft, Fire, Glass, Inland Marine, Liability Other than Auto, Rain

This certificate of authority is in full force and effect until it is revoked, canceled, or suspended according to law.

Given under my hand and official seal of office in the city of Austin,

July 12, 2016

DAVID C. MATTAX
COMMISSIONER OF INSURANCE

BY ______

Jeff Hunt, Director
Company Licensing and Registration
Commissioner's order no. 3632

