

F17000005384

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

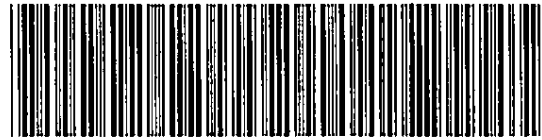
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

RA sign

W17-18825

Office Use Only



200303813522

10/04/17--01015--022 **78.75

FILED
17 NOV 27 PM 2:59
CLERK OF STATE
TALLAHASSEE, FLORIDA

S. WARREN

NOV 30 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 18, 2017

STEPHANIE WILLIAMS
1900 L. DON DODSON DRIVE
BEDFORD, TX 76021

SUBJECT: UNITED SPECIALTY INSURANCE COMPANY ;
Ref. Number: W17000078825

We have received your document for UNITED SPECIALTY INSURANCE COMPANY and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The registered agent must sign accepting the designation.

Please return your document, along with 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.

Stacey M Warren
Regulatory Specialist II

Letter Number: 517A00021092



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 4, 2017

STEPHANIE WILLIAMS
1900 L. DON DODSON DRIVE
BEDFORD, TX 76021

SUBJECT: UNITED SPECIALTY INSURANCE COMPANY
Ref. Number: W17000078825

We have received your document for UNITED SPECIALTY INSURANCE COMPANY and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

LINE 6 CAN NOT HAVE UNKNOWN, IF YOU HAVE NOT TRANSACTED BUSINESS LEAVE THAT LINE BLANK,

Please return your document, along with 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.

Stacey M Warren
Regulatory Specialist II

Letter Number: 017A00020112

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: United Specialty 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:

Stephanie Williams

Name of Person

United Specialty Insurance Company

Firm/Company

1900 L. Don Dodson Drive

Address

Bedford, TX 76021

City/State and Zip code

smwilliams@statenational.com

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

For further information concerning this matter, please call:

Stephanie Williams

at (817) 265-2000

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.*

1. United Specialty 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. Delaware	3. 20-3145738
(State or country under the law of which it is incorporated)	(FEI number, if applicable)
4. 07/11/2005	5. Perpetual
(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)	
7. 160 Greentree Drive, Suite 101, Dover, DE 19904	
(Principal office address)	
1900 L. Don Dodson Drive, Bedford, TX 76021	
(Current mailing address, if different)	
8. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)	
Name:	NRAI Services, Inc.
Office Address:	1200 South Pine Island Road
Plantation	33324
(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.

**Peter F. Souza
Assistant Secretary**

(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.

FILED
17 NOV 27 PM 2:59
STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: Terry L. Ledbetter
Address: 1900 L. Don Dodson Drive
Bedford, TX 76021

Vice Chairman: _____
Address: _____

Director: _____
Address: _____

Director: _____
Address: _____

B. OFFICERS

President: Matthew A. Freeman
Address: 1900 L. Don Dodson Drive
Bedford, TX 76021

Vice President: _____
Address: _____

Secretary: Lonnie K. Ledbetter, III
Address: 1900 L. Don Dodson Drive, Bedford, TX 76021

Treasurer: David D. Hale
Address: 1900 L. Don Dodson Drive, Bedford, TX 76021

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. Lonnie K. Ledbetter, III
(Typed or printed name and capacity of person signing application)

FILED
17 NOV 27 PM 2:59
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Addendum to Question #11, Section B.

Assistant Secretary: David M. Cleff

Address: 1900 L. Don Dodson Drive

Bedford, TX 76021

FILED

17 NOV 27 PM 2:59

SECRET
U.S. DEPARTMENT OF STATE
WASHINGTON, D.C. 20520

State of Delaware

Department of Insurance

CERTIFICATE OF COMPLIANCE/GOOD STANDING

NAIC Number: 12537

I, Trinidad Navarro, Insurance Commissioner of the State of Delaware, do hereby certify that as of September 13, 2017

UNITED SPECIALTY INSURANCE COMPANY

was duly organized under the laws of the State of Delaware, and authorized to issue policies and transact the business of insurance under the following Section(s) of Title 18, Delaware code:

Section 904 Property
Section 905 Surety
Section 906 Casualty (a)(1) Vehicle
Section 906 Casualty (a)(2) Liability
Section 906 Casualty (a)(3) Workers Compensation
and Empl Liability
Section 906 Casualty (a)(4) Burglary and Theft
Section 906 Casualty (a)(5) Personal Property
Floater
Section 906 Casualty (a)(6) Glass
Section 906 Casualty (a)(7) Boiler and Machinery

Section 906 Casualty (a)(8) Leakage and Fire
Extinguisher Equipment
Section 906 Casualty (a)(9) Credit
Section 906 Casualty (a)(10) Malpractice
Section 906 Casualty (a)(11) Elevator
Section 906 Casualty (a)(12) Congenital Defects
Section 906 Casualty (a)(13) Livestock
Section 906 Casualty (a)(14) Entertainments
Section 906 Casualty (a)(15) Miscellaneous
Section 907 Marine and Transportation

AND FURTHER, UNITED SPECIALTY INSURANCE COMPANY has filed all required documents, paid all applicable fees and taxes, and is in good standing with the Delaware Department of Insurance.

IN WITNESS THEREOF, I have hereunto set my hand and affixed the official seal of this Department at the City of Dover on September 13, 2017

