1/15/2018

Division of Corporations



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Division of Corporations Fax Number : (850)617-6383 From: Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (614)280-3338 ... : (954)208-0845 Fax Number **(..**) \*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\* Email Address:

## FOREIGN PROFIT/NONPROFIT CORPORATION

## Arch Underwriters Inc.

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## 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.

'Inc.," "Co.," "Co	orp," "Inc," "Co," or "Corp.")		
If name unavaila	ble in Florida, enter alternate corporate n	ame adopted for the purpose of transacting	g business in Florida)
Delaware		47-5374395 3	
(State or country	under the law of which it is incorporated	3. (FEI number, if app	plicable)
09/16/2015	•	5.	
(Date	of incorporation)	5. (Date of duration, if other	than perpetual)
	(SEE SECTIONS 607.1501 & 6	less in Florida, if prior to registration) 07.1502, F.S., to determine penalty liabili	ity)
145 South Street,	Suite 220, P.O. Box 1988, Morristown, N	र्। 07962	
	(Pi	rincipal office address)	
	(Current r	mailing address, if different)	
Nome and stree	et address of Florida registered agent:	(P.O. Box NOT acceptable)	. с.
Manie and stice	C T Corporation System		: '
Name:			ശ
fice Address:	1200 South Pine Island Road	<del></del>	ر ، دے
	Plantation	33324 , Florida	
	(City)	(Zip code)	
	• •	•	
iving been nan signated in this	application, I hereby accept the app	service of process for the above state cointment as registered agent and aging utes relative to the proper and comploins of my position as registered agenth Danny Verdec	ree to act in this cap ete performance of it.

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.

2018-01-15 18:14.04 EST Page 4 of 5 11. Names and business addresses of officers and/or directors: A. DIRECTORS Jerome Halgan 445 South Street, Suite 220, P.O. Box 1988, Morristown, NJ 07962 Address: . Vice Chairman: Barry Golub Director: \_ 445 South Street, Suite 220, P.O. Box 1988, Morristown, NJ 07962 Address: Timothy Forshay Director: 445 South Street, Suite 220, P.O. Box 1988, Morristown, NJ 07962. Address: B. OFFICERS Jerome Halgan President: 445 South Street, Suite 220, P.O. Box 1988, Morristown, NJ 07962 C : Vice President: 445 South Street, Suite 220, P.O. Box 1988, Morristown, NJ 07962 Address: \_ Barry Golub Treasurer: 445 South Street, Suite 220, P.O. Box 1988, Morristown, NJ 07962 Address: \_ NOTE: If necessary, you may attach an addendum to the application? listing additional officers and/or directors. 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.

Janet Kummert, Corporate Secretary (Typed or printed name and capacity of person signing application)



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ARCH UNDERWRITERS 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 FIFTEENTH DAY OF JANUARY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE REEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

20.00

Authentication: 201970444

Date: 01-15-18

5826204 8300 SR# 20180257726

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