

F18000001482

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

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2018 MAR 28 AM 9:39  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

MAR 29 2018  
J. HARRIS

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** VIKING INSURANCE COMPANY OF WISCONSIN  
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:

Patti Mueske  
Name of Person  
Sentry Insurance a Mutual Company  
Firm/Company  
1800 North Point Drive  
Address  
Stevens Point, WI 54481  
City/State and Zip code  
statutoryreporting@sentry.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patti Mueske      715      346-7452  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 20, 2018

PATTI MUESKE  
1800 NORTH POINT DRIVE  
STEVENS POINT, WI 54481

SUBJECT: VIKING INSURANCE COMPANY OF WISCONSIN  
Ref. Number: W18000015197

We have received your document for VIKING INSURANCE COMPANY OF WISCONSIN and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

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

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

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: 618A00005532

**RECEIVED**  
MAR 28 2018

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

2018 MAR 28 AM 9:39

**FILED**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
2018 MAR 19 AM 10:12  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

March 7, 2018

FROM: PATTI MUESKE  
1800 NORTH POINT DRIVE  
STEVENS POINT, WI 54481

SUBJECT: VIKING INSURANCE COMPANY OF WISCONSIN  
Ref. Number: W18000015197

We have received your document for VIKING INSURANCE COMPANY OF WISCONSIN and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

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.

TO: Jenna D Harris  
Regulatory Specialist II  
3-15-18

Letter Number: 318A00004647

The attached document qualifies as a  
Certificate of Good Standing in Wisconsin.  
Please read attached email from WI Ins  
Dept and call for a complete understanding  
of how WI operates.  
Thank you.



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

COPY

February 15, 2018

PATTI MUESKE  
1800 NORTH POINT DRIVE  
STEVENS POINT, WI 54481

SUBJECT: VIKING INSURANCE COMPANY OF WISCONSIN  
Ref. Number: W18000015197

We have received your document for VIKING INSURANCE COMPANY OF WISCONSIN and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

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: 118A00003257

RECEIVED  
MAR 07 2018

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. Viking Insurance Company of Wisconsin
(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. Wisconsin 3. 39-1150917
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. August 10, 1971 5. -
(Date of incorporation) (Date of duration, if other than perpetual)

6. N/A
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1800 North Point Drive, Stevens Point, WI 54481
(Principal office address)

(Current mailing address, if different)

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

Name: C T Corporation System
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(City) (Zip code)

FILED
2018 MAR 28 AM 9:39
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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.

James M. Halpin
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.

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

**A. DIRECTORS**

Chairman: Peter G. McPartland  
Address: 1800 North Point Drive  
Stevens Point WI 54481

Director: James E. McDonald; Director: Kip J. Kobussen  
Address: (for both) 1800 North Point Drive  
Stevens Point, WI 54481

Director: Todd M. Schroeder  
Address: 1800 North Point Drive  
Stevens Point WI 54481

Director: Michael J. Williams  
Address: 1800 North Point Drive  
Stevens Point WI 54481

**B. OFFICERS**

President: Peter G. Anhalt  
Address: 1800 Deming Way, Suite 400  
Middleton WI 53562

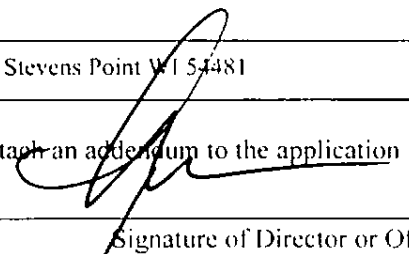
Vice President: Michael J. Williams  
Address: 1800 North Point Drive  
Stevens Point WI 54481

Secretary: Kip J. Kobussen  
Address: 1800 North Point Drive, Stevens Point WI 54481

Treasurer: Todd M. Schroeder  
Address: 1800 North Point Drive, Stevens Point WI 54481

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2018 MAR 28 AM 9:39  
SULLY COUNTY CLERK  
ALLAHASSEE FLORIDA

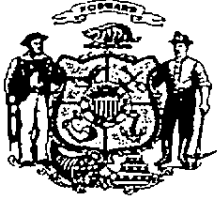
**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

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. Kip J. Kobussen, Secretary and Director  
(Typed or printed name and capacity of person signing application)

2/7/18



# ***Certificate of Compliance State of Wisconsin***

**Office of the Commissioner of Insurance**

As of This Date: **February 26, 2018**

As Commissioner of Insurance of the State of Wisconsin I have supervision of insurance business and as such hereby certify that:

**Viking Insurance Company of Wisconsin**

***Domicile State: Wisconsin***

Is duly authorized to transact the business of:

- Aircraft
- Automobile
- Credit Insurance
- Credit Unemployment
- Disability Insurance
- Fidelity Insurance
- Fire, Inland Marine and Other Property Insurance
- Legal Expense Insurance
- Liability and Incidental Medical Expense Insurance (other than automobile)
- Miscellaneous
- Ocean Marine Insurance
- Surety Insurance
- Workers Compensation Insurance

IN TESTIMONY WHEREOF, I have hereunto set my hand.

A handwritten signature in black ink, appearing to be 'D. J. ...', written over a horizontal line.

Commissioner of Insurance



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**Mueske Patti**

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**From:** Gilardi, Mary Sue - OCI <MarySue.Gilardi@wisconsin.gov>  
**Sent:** Thursday, February 8, 2018 11:26 AM  
**To:** Mueske Patti  
**Subject:** RE: Request for certifications

Good morning Ms. Mueske:

I just wanted to let you know that the WI OCI sends a certificate of compliance (aka Certificate of Good Standing) instead of certifying the certificate of authority. I can also take care of the Amended and Restated Articles at the same time.

For your future requests, please send them to [OCIRecords@wisconsin.gov](mailto:OCIRecords@wisconsin.gov) which is the e-mail for our Central Files department. They will be able to assist with certifying those other document types.

Mary Sue Gilardi, CAP  
Records Management Supervisor  
Office of the Commissioner of Insurance  
PO Box 7873  
Madison, WI 53707  
(608) 266-0091  
[marysue.gilardi@wisconsin.gov](mailto:marysue.gilardi@wisconsin.gov)

If this is an open records request, please send your request to [OCIRccords@Wisconsin.gov](mailto:OCIRccords@Wisconsin.gov).