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(Requestor's Name)							
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PICK-UP WAIT MAIL							
(Business Entity Name)							
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(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
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SECRETARY OF STATE PALLAHASSEE, FLORIDA

RECEIVED

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APPROVED AND. FILED

COVER LETTER

TO:	Registration Section						
	Division of Cor	porations					
		poration d/b/a ALIC	Underwriters	3			
SUBJ	IECT:					 	
		Name of	corporation	ı - mus	t include suffix		
Dear S	Sir or Madam:						
"Сепі	ficate of Existence		f Good Sta	nding"	and check are subn	t Business in Florida," nitted to register the	
	return all corresp Johnson	ondence concerning	g this matte	r to the	following:		
			Name of	Person			
Trean	Corporation						
	, - ·		Firm/Con	nanu			
150 La	ike Street West		r im/con	прапу			
			Addr	ess	•	·	
Wayza	ta, Minnesota 5539	1					
			City/State a	ınd Zin	code		
plawro	w@treancorp.com		ony out o	2.1	0000		
		E-mail address:	to be used	for futi	are annual report no	ntification)	
		is man addraga,	to the direct	101 141	are annual report in	Miredion,	
For fu	rther information	concerning this mat	ter, please	call:			
Jill K Johnson			952	952 974-2230			
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	Name of Person	1	Area Coc	le	Daytime Teleph	one Number	
	STREET/COU	RIER ADDRESS:		MAILING ADDRESS:		DRESS:	
	Registration Sec	etion			Registration Section		
Division of Corporations Clifton Building				Division of Corporations P.O. Box 6327			
2661 Executive Center Circle Tallahassee, FL 32301				Tallahassee, FL 32314			
Enclos	sed is a check for t	the following amou	nt:				
☐ \$70	0.00 Filing Fee	□ \$78.75 Filing I Certificate of			75 Filing Fee & ified Copy	S87.50 Filing Fee. Certificate of Status &	

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. Trean Corporation: 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) 41-1966220 2. (State or country under the law of which it is incorporated) (FEI number, if applicable) March 3, 2000 (Date of incorporation) (Date of duration, if other than perpetual) N/A 6. (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 150 Lake Street West, Wayzata, Minnesota 55391 (Principal office address) 150 Lake Street West, Wayzata, Minnesota 55391 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Sarah Perry Name: 5900 N. Andrews Avenue, Suite 1000 Office Address: Fort Lauderdaje 33309

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.

, Florida

M. M. O. 1 11 2019

(Registered agent's signature)

(City)

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 Andrew M. O'Brien Chairman: 150 Lake Street West Address: Wayzata, MN 55391 Address: __ Randall D. Jones Director: 150 Lake Street West Address: Wayzata, MN 55391 Steven C. Novak Director: 150 Lake Street West Address: Wayzata, MN 55391 **B. OFFICERS** Andrew M. O'Brien President: 150 Lake Street West Address: Wayzata, MN 55391 Vice President: Address: Steven Lee Secretary: 150 Lake Street West, Wayzata, MN 55391 Address: Julie A. Baron Treasurer: 150 Lake Street West, Wayzata, MN 55391 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. Julie A. Baron, Treasurer 13. _____

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

Office of the Minnesota Secretary of State Certificate of Good Standing

I, Steve Simon, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name: TREAN Corporation

Date Filed: 03/03/2000

File Number: 11B-93

Minnesota Statutes, Chapter: 302A

Home Jurisdiction: Minnesota

This certificate has been issued on: 01/10/2019

Oteve Pinn Steve Simon

Secretary of State State of Minnesota