FAMILIS43

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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COVER LETTER

TO: Registration S Division of Co				
Prefen	red Employers Insuran	ce Company		
SUBJECT:	Name o	of corporation	- must include suffix	
Dear Sir or Madam:				
	nce," or "Certificate	of Good Stan	Authorization to Transact Business ding" and check are submitted to ress in Florida.	
Please return all corre Donna Burns	spondence concerni	ng this matter	to the following:	
		Name of l	Person	
Donna Burns Insurance	Consultant			
*		Firm/Com	pany	·
P. O. Box 688				
		Addre	SS	
Caldwell TX 77836				
dtague@wrberklery.cor	n	City/State a	nd Zip code	2019 86 9 1 5
		to be used f	or future annual report notification) -4.5
For further information	on concerning this m	atter, please c	all:	
Donna Burns		979 at (272-0115	կ։ 23
Name of Pers			Daytime Telephone Numb	
Registration S Division of C Clifton Buildi	orporations ing we Center Circle	S:	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for	or the following amo	unt:		
☐ \$70.00 Filing Fee	S78.75 Filing Certificate of		Certified Copy Certi	0 Filing Fee, ficate of Status & fied 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.

	orporation; must include "INCORPORATED," "Corp." "Inc.," "Co," or "Corp.")	COMPANY," "CORPORATION,"	
(If name unavail	able in Florida, enter alternate corporate name ado	pted for the purpose of transacting busin	ness in Florida)
California	_	-1874671	
(State or count	ry under the law of which it is incorporated)	(FEI number, if applicabl	e)
12/11/1997	Po	rpetual	
(Date	55.	(Date of duration, if other than pe	erpetual)
N/A			
	(Date first transacted business in FI (SEE SECTIONS 607.1501 & 607.1502 , Suite 200, San Diego, CA 92123		
·	(Principal	office address)	
			2019
	(Current mailing a	ddress, if different)	
	-		`. <u>.</u> =
Name and stre	et address of Florida registered agent: (P.O. 1	3ox NOT acceptable)	KC 15
. Name and <u>stre</u> Name:	et address of Florida registered agent: (P.O. 1 C. T. Corporation System	Box NOT acceptable)	15 PH
Name:		Box <u>NOT</u> acceptable)	¥ 15 PH 4: 2
	C. T. Corporation System	Box NOT acceptable) 33324 , Florida	¥ 15 PH 4: 23

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.

Stephen Rullis, VP & Asst. Secy.

(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. DIRE	William Robert Berkley	
Address:	600 Brickell Avenue, 39th Floor	
	Miami, FL 33131	
Vice Chai	rman:	
Address:		
- Director:	Paul James Hancock	
Address:	475 Steamboat Road	
, , , , , , , , , , , , , , , , , , , ,	Greenwich, CT 06830	
Director:	Carol Josephine LaPunzina	
Address:	475 Steamboat Road	
7 1001 0,117.	Greenwich, CT 06830	
B. OFFI	William Robert Berkley, Jr.	
Address:	475 Steamboat Road	2019
riouress.	Greenwich, CT 06830	Ġ.
Vice Presi	James Gerald Shiel dent:	<u></u>
Address:	475 Steamboat Road	70
7	Greenwich, CT 06830	. 25
Secretary:	Ira Seth Lederman	
Address:	475 Steamboat Road, Greenwich, CT 06830	
Treasurer:	Richard Mark Baio	
	475 Steamboat Road, Greenwich, CT 06830	
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or di	rectors.
12	Jul	
The offic	Signature of Director or Officer er or director signing this document (and who is listed in number 11 above) affirms that the fact and that he or she is aware that false information submitted in a document to the Department of Segrec felony as provided for in s.817.155, F.S. Ira S. Lederman, Executive Vice President and Secretary	

State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

PREFERRED EMPLOYERS INSURANCE COMPANY

FILE NUMBER: FORMATION DATE: C2062506

12/11/1997

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized toexercise all of its powers, rights and privileges in the State off California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of November 04, 2019.

> ALEX PADILLA Secretary of State