# F2000003924

(Requestor's Name)				
	<u>.</u>			
(Address)				
- ΛΔ1	dress)			
Ų <b>.</b> 5	u.000)			
(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
MACCO	VCV 75°C	1917		

Office Use Only



500348938055

07/27/20--01034--002 \*\*78.75

RECEIVED

JUL 2 3 2020

9/12/20



Division of Corporations

August 5, 2020

SABRINA MIESOWITZ 280 PARK AVENUE EAST TOWER, 25TH FLOOR NEW YORK, NY 10017

SUBJECT: LLOYD'S AMERICA, INC.

Ref. Number: W20000085090

We have received your document for LLOYD'S AMERICA, INC. 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 document must contain both the street address of the principal office and the mailing address of the entity.

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.

Yvette Scott Document Specialist II

Letter Number: 920A00014665

RECEIVED

SEP 0.9 2020

## COVER LETTER

. 16 2011 TO: Registration Section Division of Corporations SUBJECT: Lloyd's America, Inc. 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: Sabrina Miesowitz Name of Person Lloyd's America, Inc. Firm/Company 280 Park Avenue, East Tower, 25th Floor Address New York, NY 10017 City/State and Zip code sabrina.miesowitz(a/Hoyds.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ( $\frac{212}{\text{Area Code}}$ )  $\frac{382-4081}{\text{Daytime Telephone Number}}$ Sabrina Miesowitz Name of Person STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314 Tallahassee, FL 32303 Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE □ \$70.00 Filing Fee ■ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee. Certificate of Status Certified Copy 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.

Lloyd's America	a, Inc.		
(Enter name of c	orporation; must include "INCORPORATED," "orp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATION,"	
(If name unavail	able in Florida, enter alternate corporate name ado	pted for the purpose of transacting business in Florida	
Massa Variale			
(State or country under the law of which it is incorporated)			
4. (Date of incorporation) 5		(Date of duration, if other than perpetual)	
6. May 1, 2020		·	
/	(Date first transacted business in Fl (SEE SECTIONS 607.1501 & 607.1502, 25th Floor, New York, NY 10017 (Principal office s	F.S., to determine penalty liability)	
280 Park Avenue	, 25th Floor, New York, NY 10017		
	(Current mailing ac	ddress, if different)	
R. Name and <u>stree</u> Name:	et address of Florida registered agent: (P.O. B C T Corporation System	ox <u>NOT</u> acceptable)	
Office Address:	1200 South Pine Island		
	RoadPlantation	$ = \frac{33324}{\text{(Zip code)}} $	
	(City)		

### 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.

Cardell Rankin, Asst 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.

A. DIRECTORS					
□Chairman	Name: Henry N. Watkins	□ Chairman	Name: Sabrina A. Miesowitz		
□Vice Chairman	Address: 280 Park Avenue	□ Vice Chairman	Address: 280 Park Avenue		
Director	East Tower, 25th Floor	Director	East Tower, 25th Floor		
President	New York, NY 10017	□President	New York, NY 10017		
□Vice President		□ Vice President			
☐ Secretary	Treasurer	Secretary	□Treasurer		
□Other	□ Other	□Other	□Other		
□Chairman	Name: William M. Wallace  200 W Main St  Address:	□Chairman	Name: Timothy W. Grant  280 Park Ayenue		
	Address: Frankfort, KY 40601	□Vice Chairman	Address: 280 Park Avenue East Tower, 25th Floor		
□Director		□Director			
□President		□President	New York, NY 10017		
□Vice President		□ Vice President			
□Secretary	Treasurer	☐ Secretary	□Treasurer		
□Other	Other	■Other	Other		
□Chairman □Vice Chairman □Director □President □Vice President	Marc Bloom Name:  280 Park Avenue Address: East Tower, 25th Floor New York, NY 10017	□Chairman □Vice Chairman □Director □President □Vice President	Name:		
□Secretary	□Treasurer	□Secretary	□Treasurer		
□Other	Other	□Other	Other		
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.  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.

# State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of LLOYD'S AMERICA, INC. was filed on 12/23/1996, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



并外次

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 15th day of May two thousand and twenty.

Braden C Hyles

Brendan C Hughes Executive Deputy Secretary of State