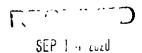
## F20000004833

(Red	questor's Name)		
(Address)			
(Add	dress)		
(City	//State/Zip/Phone	#)	
PICK-UP	☐ WAIT	MAIL	
(Bus	siness Entity Name	e)	
(Document Number)			
Certified Copies	Certificates	of Status	
Special Instructions to F	Filing Officer:		
M30-11-	4904		

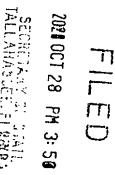
Office Use Only



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09/15/20--01004--017 ++78.75



it is a second

## **COVER LETTER**

TO: Registration Section Division of Corp				
•	nnce US Company			
30b3LC1.	Name of corpora	tion - m	ust include suffix	
Dear Sir or Madam:				
"Certificate of Existence	on by Foreign Corporation " or "Certificate of Good! corporation to transact bu	Standing	" and check are sub	
Please return all correspo Liane Birchler	ondence concerning this ma	atter to t	he following:	
	Name	of Pers	on	<u> </u>
Westmont Associates, Inc.				
1763 Marlton Pike East, St		Compan	•	
Cherry Hill, NJ 08003	۸	ddress		
	Charlen		in and	
michelle@next-insurance.c	City/Sta com	te and z	ip code	
	E-mail address: (to be us	sed for f	iture annual report i	notification)
For further information c	oncerning this matter, plea	ise call:		
Liane Birchler	856	:	216-0220	
Name of Person	at ( Area (	Code	Daytime Telep	hone 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	ne following amount:			
□ \$70.00 Filing Fee	■ \$78.75 Filing Fee & Certificate of Status		8.75 Filing Fee & rtified Copy	S87.50 Filing Fee, 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.

Next Insurance 1  1.	US Company		
	orporation; must include "INCORPORATED," "Corp," "Inc," "Co." or "Corp.")	OMPANY," "CORPORATIO	N."
(If name unavaila	ible in Florida, enter alternate corporate name adop	sted for the purpose of transacti	ing business in Florida)
Delaware 2.		2948682	
	y under the law of which it is incorporated)  5.	(FEI number, if a	pplicable)
	of incorporation)	(Date of duration, if othe	r than perpetual)
N/A 5.			
C/O Corporation	(Date first transacted business in Flo (SEE SECTIONS 607.1501 & 607.1502, Service Company, 251 Little Falls Drive, Wilming	F.S., to determine penalty liabi	ility)
		ffice address)	
C/O Corporation	Service Company, 251 Little Falls Drive, Wilming		
·	(Current mailing ac	·	
3. Name and <u>stree</u> Name:	Chief Financial Officer  PO Box 6200 (32314-6200) 200 E. Gaines St.	ox <u>NOT</u> acceptable) -	FIL 2021 OCT 28 PECRETARY: TAELAHASSEE
Office Address:		_	7 3 ITT
	Tallahassee	32339 _ , Florida	∰ ω <b>O</b>
	(City)	(Zip code)	<b>69</b>
Having been nam lesignated in this further agree to co	ent's acceptance: ed as registered agent and to accept service a application, I hereby accept the appointmen omply with the provisions of all statutes relat amiliar with and accept the obligations of my	t as registered agent and ag ive to the proper and comp	ree to act in this capacity. lete performance of my
_	Chief Financial Officer (Registered agen	t'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: Refer to attachment
Address:
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President:
Address:
Vice President:
Address:
Secretary:
Address:
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.  12. Midulle (lucus)  812E430/9FE2492. Signature of Director or Officer
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. Michelle Cheung CFO

## Next Insurance US Company Directors and Officers

Name	Title
Guy Goldstein	Director, President
Nisim Tapiro	Director, VP of Research and Development, Secretary
Matthias Weber	Director
Daniel Gibson	Director
Michelle Cheung	CFO
Sofya Pogreb	Chief Underwriter and Chief Operating Officer
Byron Whitman	Controller



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT "NEXT INSURANCE US COMPANY" IS

DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING BEEN

CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW

AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF INCORPORATION, FILED THE TWENTY-SIXTH DAY OF SEPTEMBER, A.D. 2017, AT 4:33 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATE IS THE ONLY PAPER OF RECORD, THE CORPORATION IN

QUESTION NOT HAVING FILED AN AMENDMENT NOR HAVING MADE ANY

CHANGE WHATSOEVER IN THE ORIGINAL CERTIFICATE AS FILED.

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

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

Authentication: 203856772

Date: 10-14-20