## F21000002424

(Re	equestor's Name)	
(Ad	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Nan	ne)
(Dx	ocument Number)	
Certified Copies	Certificates	of Status
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SECRETARY OF STATE

MAY - 4 2021 M. SOLOMON

# 2821 APR 14 PM 3:40

### **COVER LETTER**

	ion of Corporations			
SURIFCT	RP Underwriting, Inc.			
Joba Lei.	Name of	corporation -	must include suffix	
Dear Sir or M	adam:			
"Certificate of		Good Standir	thorization to Transact Business in Flong" and check are submitted to register in Florida.	
Please return :	all correspondence concerning	this matter to	the following:	
Francois Duris				75 <u>0</u>
		Name of Pe	rson	
Westmont Ass	ociates, Inc.			S 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
		Firm/Compa	ny	<del>\frac{\frac}{\frac{\frac{\frac{\frac{\frac}{\frac{\frac{\frac{\frac{\frac{\frac}{\frac{\frac{\frac{\frac{\frac}{\frac{\frac{\frac{\frac{\frac}{\frac}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac}\frac{\frac{\frac{\frac{\frac}{\frac{\frac{\frac{\frac}{\frac}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}</del>
1763 Marlton I	Pike East, Suite 200			
		Address		DR.A.
Cherry Hill, N.	J 08003			<u>S</u> m
	(	City/State and	Zip code	
Jesper.hansen@	@riskpoint.eu			
	E-mail address: (	to be used for	future annual report notification)	
For further inf	formation concerning this mat	ter, please call	:	
Francois Duris	at	(856	216-0220	
Name	e of Person	Area Code	Daytime Telephone Number	_
Regist Divisi The C 2415 l	EET/COURIER ADDRESS: tration Section ion of Corporations centre of Tallahassee N. Monroe Street, Suite 810 nassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
	check for the following amour eck payable to: FLORIDA DEP, ng l'ee \$78.75 Filing I Certificate of S	ARTMENT O Fee & □ \$	F STATE  78.75 Filing Fee & S87.50 Filin Certified Copy Certificate of Certified Co	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.

1. RP Underwritin					
	orporation; must include "INCORPORATED," " orp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATION,"			
		C. C	<del></del>		
		pted for the purpose of transacting business in Florid	а)		
2. Delaware	\$				
	y under the law of which it is incorporated)	(FEI number, if applicable)			
4. 11/04/2020	5				
(Date	of incorporation)	(Date of duration, if other than perpetual)	_		
u	(Date first transacted business in FI	orida, if prior to registration)			
	(SEE SECTIONS 607.1501 & 607.1502	, F.S., to determine penalty liability)			
7. 154 W 14th St, 2	nd Floor, New York, NY 10011				
	(Principal office	street address)			
		_			
	(Current mailing a	ddress, if different)		282	
			>- <b>19</b>	2021 APR 14	
8. Name and stree	et address of Florida registered agent: (P.O. E	Box NOT acceptable)	10 To	>ŏ	
Name:	Corporation Service Company		%. <del>₹</del>	£-	1
Maine,	1201 M St	_	<u> </u>	<u> </u>	
Office Address:	1201 Hays Street	<u> </u>	. S. T.	<u>م</u> دن	
	Tallahassee	, Florida <sup>32301</sup>	3.17.1.5 3.17.1.5	PH 3: 40	
	(City)	(Zip code)	i <del></del>	S	
O Donistown d	untin againtanas				
9. Registered ago	ent 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.

Corporation Service Company		
By: Samantha Alterman	- 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.

A. DIRECTORS			
Chairman	Name:	llChairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director	New York, NY 10011	[]Director	New York, NY 10011
□President		President	
□Vice President		□Vice President	
☐ Secretary	C Treasurer	☐ Sccretary	□Treasurer
□Other	Other	Co-CEO	Board Member Board Member
□ Chairman	Name: Nikolai Djupesland	□Chairman	Michael McGowan
	154 W 14th St, 2nd Floor	□Vice Chairman	154 W 14th St. 2nd Floor
□Vice Chairman □Director	New York, NY 10011	[] Director	Address:
	<del></del>		
President		☐President	
		□Vice President	
☐ Secretary	☐Treasurer  Roard Member	Secretary  Managing	□Treasurer  Dir. Board Member
Other Co-CEO	Board Member  Gother	■Other	Other
□Chairman	Name:	<b>⊡</b> Chairman	Name:
∐Vice Chairman	Address:	□Vice Chairman	Address:
□Director		□Director	
□President		□President	
□Vice President		[]Vice President	
☐ Secretary	☐ Treasurer	☐ Secretary	☐Treasurer
□Other	Other	□Other	
Important Notice; Undividuals may be	Use an attachment to report more than six (6). The at added to the index when filing your Florida Departr	tachment will be imaged nent of State Annual Rep	for reporting purposes only. Non-indexed port 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.

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### Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "RP UNDERWRITING, INC." IS DULY

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

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE SIXTH DAY OF APRIL, A.D. 2021.

Authentication: 202879286

Date: 04-06-21