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COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJ	JECT: Car Care North Amer	ica, Inc.			
., 0		Name of corporati	on - mu	st include suffix	
Dear S	Sir or Madam:				
"Certi	nclosed "Application by For- ficate of Existence," or "Cer referenced foreign corporati	tificate of Good St	anding'	and check are sub	
Piease	return all correspondence c	oncerning this mat	ter to th	e following:	
Felicia	a Daye				
		Name	of Perso	n	····
AmTr	ust North America, Inc.				
		Firm/C	nıpany		
800 St	perior Ave E, 21st Floor				
		Ad	dress		
Clevel	and, OH 44114				
		City/State	and Zi	p code	
regula	torycompliance@amtrustgroup	.com			
	E-mail	address: (to be use	d for fu	ure annual report n	otification)
For fu	rther information concerning	g this matter, pleas	e call:		
Felicia	Daye	216 at (9(901-8551	
	Name of Person	Area Co	ode	Daytime Telepl	none Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Please			□ \$78	STATE .75 Filing Fee & tified Copy	 \$87.50 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.

l							
	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATIO	Ν,"				
(If name unavaila	able in Florida, enter alternate corporate name ad	lopted for the purpose of transacti	ng business in Florida)	-			
Delaware	Delaware 86-2323391						
2(State or country	y under the law of which it is incorporated)	(FEI number, if applicable)		-			
02/02/2021							
(Date	of incorporation)	(Date of duration, if other than perpetual)		-			
6. Upon Approval	Unon Approval						
v	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150)		lity)	•			
7. 903 NW 65th Stre	eet, Suite 300, Boca Raton, FL 33487						
	(Principal office	street address)		-			
800 Superior Ave	E. 21st Floor, Cleveland, OH 44114		202 SEI IN				
	(Current mailing	address, if different)					
8. Name and stree	et address of Florida registered agent: (P.O.	Box <u>NOT</u> acceptable)	WH P				
Name:	Corporation Service Company		PH OF S				
Office Address:	1201 Hays Street		PM 4: 34 OF STATE SEE, FL				
	Tallahassee	, Florida 32301					
	(City)	(Zip code)					
designated in this further agree to co	ent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointme omply with the provisions of all statutes rela with and accept the obligations of my posit	nt as registered agent and agr ative to the proper and comple tion as registered agent.	ee to act in this capa	city. I			
	Registered agent's sign	nature)					
10. Attached is a c	certificate of existence duly authenticated, no	ot more than 90 days prior to d	elivery of this annlica	ation to			

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

A. DIRECTORS								
Chairman	Name: Benjamin Seamus Russell	□Chairman	Name:c/o AmTrust Financial Services, Address:					
□Vice Chairman	Address: c/o Car Care Plan Limited	□Vice Chai nn an						
Director	Jubilee House	■ Director □ President □ Vice President						
■ President	5 Mid-Point Business Park		Boca Raton, FL 33487					
□Vice President	Thornbury, West Yorkshire, EN BD3 7AG							
Secretary	□Treasurer	Secretary	□Treasurer					
□Other	□ Other	□Other	Other					
□Chairman □Vice Chairman	Name: Simon Johnathan Wright Clo Car Care Plan Limited	□Chairman □Vice Chairman	Andrew Radi Name:c/o Car Care Plan Limited Address:					
Director	Jubilee House	□Director □President □Vice President	5 Mid-Point Business Park Thornbury, West Yorkshire, EN BD3 7A0					
□President	5 Mid-Point Business Park Thornbury, West Yorkshire, EN BD3 7AG							
□Vice President								
Secretary	■ Treasurer	☐ Secretary	[]Treasurer					
□Other	Other	□Other	□Other					
	Gavin William Work Tinch	□ Chairman	Name:					
□Vice Chairman	Address: c/o Car Carte Plan Limited	□Vice Chairman	Address:					
□Director	5 Mid-Point Business Park	□Director						
President	Thornbury, West Yorkshire, EN BD3 7A5	□President						
□Vice President		□Vice President						
□ Secretary	□Treasurer	☐ Secretary	□Treasurer					
□Other	Other	□Other	Other					
Important Notice: I individuals may be	Ise an attachment to report more than six (6). The atta added to the index when filing four Ploydla Department	ent of State Annual Re	port form.					
12	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.								

Page 1

Delaware The First State

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

DELANARE, DO HEREBY CERTIFY "CAR CARE NORTH AMERICA, INC." IS DULY

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

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

OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF APRIL, A.D.

2021.



Authentication: 203068660

Date: 04-27-21