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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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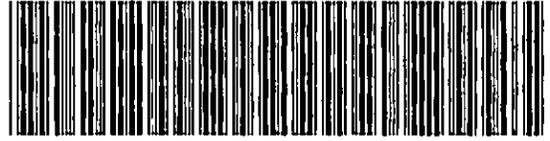
(Business Entity Name)

(Document Number)

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2022 JUN 10 PM 4:35  
TALLAHASSEE, FL

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Westfield Select Insurance Company  
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:

Liane Birchler  
Name of Person  
Westmont Associates, Inc.  
Firm/Company  
1763 Marlton Pike East, Suite 200  
Address  
Cherry Hill, NJ 08003  
City/State and Zip code  
frankcarrino@westfieldgrp.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Liane Birchler at ( 856 ) 216-0220  
Name of Person Area Code Daytime Telephone Number

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite S10  
Tallahassee, FL 32303

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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 & Certificate of Status     \$78.75 Filing Fee & Certified 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.

1. Westfield Select Insurance Company
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Ohio 3. 86-3768390
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 6/21/2021 5.
(Date of incorporation) (Date of duration, if other than perpetual)

6. N/A
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. One Park Circle, Westfield Center, OH 44251
(Principal office street address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CHIEF FINANCIAL OFFICER

Office Address: 200 E GAINES ST

TALLAHASSEE, FL Florida 32399
(City) (Zip code)

2022 JUN 10 PM 4:35
TALLAHASSEE, FL
FILED

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.

Chief Financial Officer

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

A. DIRECTORS

Chairman Name: Please see attached.

Vice Chairman Address: \_\_\_\_\_

Director \_\_\_\_\_

President \_\_\_\_\_

Vice President \_\_\_\_\_

Secretary  Treasurer

Other \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: \_\_\_\_\_

Vice Chairman Address: \_\_\_\_\_

Director \_\_\_\_\_

President \_\_\_\_\_

Vice President \_\_\_\_\_

Secretary  Treasurer

Other \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: \_\_\_\_\_

Vice Chairman Address: \_\_\_\_\_

Director \_\_\_\_\_

President \_\_\_\_\_

Vice President \_\_\_\_\_

Secretary  Treasurer

Other \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: \_\_\_\_\_

Vice Chairman Address: \_\_\_\_\_

Director \_\_\_\_\_

President \_\_\_\_\_

Vice President \_\_\_\_\_

Secretary  Treasurer

Other \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: \_\_\_\_\_

Vice Chairman Address: \_\_\_\_\_

Director \_\_\_\_\_

President \_\_\_\_\_

Vice President \_\_\_\_\_

Secretary  Treasurer

Other \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: \_\_\_\_\_

Vice Chairman Address: \_\_\_\_\_

Director \_\_\_\_\_

President \_\_\_\_\_

Vice President \_\_\_\_\_

Secretary  Treasurer

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.

Frank Carrino  
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 § 817.155, F.S.

13 Frank Carrino, Chief Legal Officer and Secretary  
(Typed or printed name and capacity of person signing application)

Edward James Largent III	Pres, CEO, and Board Chair	One Park Circle, PO Box 5001 Westfield Center OH 44251
Joseph Christian Kohmann	CFO, and Treasurer	One Park Circle, PO Box 5001 Westfield Center OH 44251
Frank Anthony Carrino	Chief Legal Officer and Secretary	One Park Circle, PO Box 5001 Westfield Center OH 44251
Robert William Bowers	National Claims and Customer Service Leader	One Park Circle, PO Box 5001 Westfield Center OH 44251
Jeffrey Scott Gillentine	Controller	One Park Circle, PO Box 5001 Westfield Center OH 44251
Robyn Renee Hahn	President Commercial Lines	One Park Circle, PO Box 5001 Westfield Center OH 44251
Mark Anthony Kidd	Mid Market UW and Sales Leader	One Park Circle, PO Box 5001 Westfield Center OH 44251
John Kuhn	President Westfield Specialty	One Park Circle, PO Box 5001 Westfield Center OH 44251
Terry Lee McClaskey Jr	National Personal Lines Leader	One Park Circle, PO Box 5001 Westfield Center OH 44251
James Robert Merrz	Chief Actuarial and Analytic Officer	One Park Circle, PO Box 5001 Westfield Center OH 44251
Kristine Lynn Neale	Chief of Staff	One Park Circle, PO Box 5001 Westfield Center OH 44251
Jennifer Constantine Palmieri	Chief People Officer	One Park Circle, PO Box 5001 Westfield Center OH 44251
Tracey Lynn Petkovic	Chief Information Officer	One Park Circle, PO Box 5001 Westfield Center OH 44251
Michael Joseph Prandi	Chief Operations Officer	One Park Circle, PO Box 5001 Westfield Center OH 44251
Stuart Wayne Rosenberg	Chief Innovation and Strategy Officer	One Park Circle, PO Box 5001 Westfield Center OH 44251
David Harold Ruppel	Agribusiness UW and Sales Leader	One Park Circle, PO Box 5001 Westfield Center OH 44251
Peter Robert Schwanke	Chief Risk Officer	One Park Circle, PO Box 5001 Westfield Center OH 44251
Gary William Stumpp	National Surety Leader	One Park Circle, PO Box 5001 Westfield Center OH 44251
Craig David Welsh	Chief Distribution Officer	One Park Circle, PO Box 5001 Westfield Center OH 44251
George Krieg Wiswesser	Chief Investment Officer	One Park Circle, PO Box 5001 Westfield Center OH 44251
Barbara Marie Bufkin	Director	4725 Piedmont Row Ste 600 Charlotte NC 28210
Cheryl Ila Carlisle	Director	Retired - Ernst & Young- 950 Main Avenue Suite 1800 Cleveland Ohio 44113
David Preston Hollander	Director	Retired
Michael Tufts Jeans	Director	6001 EudidAve Ste 120 Cleveland OH 44103
John Patrick Lamigan Jr	Director	Baldwin Wallace University, 275 Eastland Road, Berea, OH 44017
Edward James Largent III	Director	One Park Circle, PO Box 5001 Westfield Center OH 44251
Craig David Pfeiffer	Director	14 Auserehl Court Huntington NY 11743
Billie Kay Rawot	Director	2 Park Circle Westfield Center OH, 44251
John Lewis Watson	Director	Retired

UNITED STATES OF AMERICA  
STATE OF OHIO  
OFFICE OF THE SECRETARY OF STATE

*I, Frank LaRose, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show WESTFIELD SELECT INSURANCE COMPANY, an Ohio corporation, Charter No. 4700592, having its principal location in Westfield Center, County of Medina, was incorporated on June 21, 2021 and is currently in GOOD STANDING upon the records of this office.*



*Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 4th day of May, A.D. 2022.*

A handwritten signature in black ink, appearing to read "Frank LaRose".

Ohio Secretary of State

Validation Number: 202212402614