

F2000004388

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

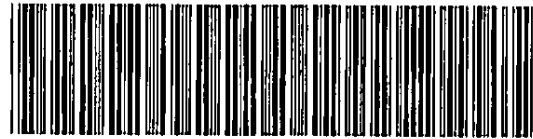
(Business Entity Name)

(Document Number)

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S. FRANKLIN

JUL 15 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Mainsail 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:

Victor Martinez

Name of Person

Perr&Knight, Inc.

Firm/Company

401 Wilshire Blvd., Suite 300

Address

Santa Monica, CA 90401

City/State and Zip code

pmaloney@spinnakerins.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Victor Martinez

at (310) 893-0047

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 810
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. Mainsail 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. Texas

(State or country under the law of which it is incorporated)

3. 87-3513709

(FEI number, if applicable)

4. 11/10/2021

(Date of incorporation)

5. Perpetual

(Date of duration, if other than perpetual)

6.

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

7. 522 Congress Avenue, Suite 500, Austin, TX 78701

(Principal office street address)

1 Pluckemin Way, Suite 102, Bedminster, NJ 07921

(Current mailing address, if different)

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee

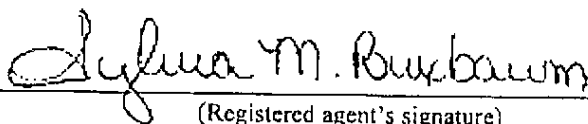
(City)

, Florida 32301

(Zip code)

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.



authorized representative

(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.

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A. DIRECTORS

☐ Chairman Name: See attached list

☐ 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 _____

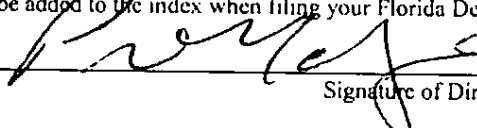
☐ President _____

☐ 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.

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.

13. Peter Maloney, Secretary
(Typed or printed name and capacity of person signing application)

Mainsail Insurance Company

Officers

<u>Name</u>	<u>Title</u>	<u>Business Address</u>
Torben Ostergaard	Chief Executive Officer and President	1 Pluckemin Way, Suite 102, Bedminster NJ 07921
David Ingrey	Chief Operating Officer	1 Pluckemin Way, Suite 102, Bedminster NJ 07921
Jesse Willmott	Chief Financial Officer and Treasurer	1 Pluckemin Way, Suite 102, Bedminster NJ 07921
Miles Alkins	Chief Underwriting Officer	1 Pluckemin Way, Suite 102, Bedminster NJ 07921
Peter Maloney	General Counsel and Secretary	1 Pluckemin Way, Suite 102, Bedminster NJ 07921
Ken Ingrey	Head of Business Development	1 Pluckemin Way, Suite 102, Bedminster NJ 07921
Rob Cedrone	Controller	1 Pluckemin Way, Suite 102, Bedminster NJ 07921
Stewart Ellis	Executive Vice President	1 Pluckemin Way, Suite 102, Bedminster NJ 07921
Richard McCathron	Executive Vice President	1 Pluckemin Way, Suite 102, Bedminster NJ 07921
Ran Harpaz	Chief Technology Officer	1 Pluckemin Way, Suite 102, Bedminster NJ 07921
Tal Hornstein	Chief Information Security Officer	1 Pluckemin Way, Suite 102, Bedminster NJ 07921
Klarissa Marenitch	Chief Information Officer	1 Pluckemin Way, Suite 102, Bedminster NJ 07921
Craig Iannuzzi	Vice President, Underwriting	1 Pluckemin Way, Suite 102, Bedminster NJ 07921
Dominick Tassone	Vice President, Underwriting	1 Pluckemin Way, Suite 102, Bedminster NJ 07921
Tracy Bowden	Assistant Secretary	1 Pluckemin Way, Suite 102, Bedminster NJ 07921
Anirudh Badia	Assistant Treasurer	1 Pluckemin Way, Suite 102, Bedminster NJ 07921

Directors

<u>Name</u>	<u>Business Address</u>
Tracy Bowden	1 Pluckemin Way, Suite 102, Bedminster NJ 07921
David Ingrey	1 Pluckemin Way, Suite 102, Bedminster NJ 07921
Pete Maloney	1 Pluckemin Way, Suite 102, Bedminster NJ 07921
Richard McCathron	1 Pluckemin Way, Suite 102, Bedminster NJ 07921
Torben Ostergaard	1 Pluckemin Way, Suite 102, Bedminster NJ 07921
Rich Primerano	1 Pluckemin Way, Suite 102, Bedminster NJ 07921
Jesse Willmott	1 Pluckemin Way, Suite 102, Bedminster NJ 07921

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Texas Department of Insurance

Certificate of Authority

License no. 13766401

Licensed since: January 21, 2022

Department Certification

Mainsail Insurance Company
(domestic stock fire and casualty company)
organized under the laws of the state of Texas

This entity has complied with the laws of the state of Texas, as applicable, and is authorized to transact the following lines of insurance:

Accident, Aircraft Liability, Aircraft Physical Damage, Allied Coverages, Auto Physical Damage, Automobile Liability, Boiler & Machinery, Burglary & Theft, Credit, Employers' Liability, Fidelity & Surety, Fire, Forgery, Glass, Hail, Health, Inland Marine, Liability Other than Auto, Livestock, Rain

This certificate of authority is in full force and effect until it is revoked, canceled, or suspended according to law.

Given under my hand and official seal of office
in the city of Austin,

January 27, 2022

CASSIE BROWN
COMMISSIONER OF INSURANCE

BY


John Carter, Director

Company Licensing and Registration
Financial Regulation Division
Commissioner's order no. 3632



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