

F230000005015

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

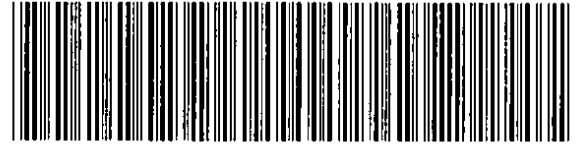
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
2023 AUG 28 PM 2:17
SECRETARY OF STATE
TALLAHASSEE, FL

W23-98467



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 1, 2023

ARIEL VADEBONCOEUR
27 MAIN STREET, FIRST FLOOR
BURLINGTON, VT 05401 US

SUBJECT: RECREATION RISK RETENTION GROUP, INC.
Ref. Number: W23000098467

We have received your document for RECREATION RISK RETENTION GROUP, INC. and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Ariel Jones
Regulatory Specialist II

Letter Number: 923A00015993

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Recreation Risk Retention Group, Inc.

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:

Ariel Vadeboncoeur

Name of Person

Advantage Insurance Management (USA) LLC

Firm/Company

27 Main Street, First Floor

Address

Burlington, VT 05401

City/State and Zip code

a.vadeboncoeur@aihusa.com

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

For further information concerning this matter, please call:

Ariel Vadeboncoeur

at (802) 238-5733

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. Recreation Risk Retention Group, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- n/a
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Vermont 3. 81-1554959
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 02/18/2016 5. n/a
(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. 27 Main Street, First Floor, Burlington, VT 05401
(Principal office street address)
- same
(Current mailing address, if different)

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

Name: Kathy J. Maas Florida Chief Financial Officer

Office Address: Butler Weismuller, 3600 Maclay Blvd, Ste 201 Plaza Level 11,
Tallahassee Tallahassee, Florida 32312 32399
(City) (Zip code)

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TALLAHASSEE, FL

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.

(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: David R. Leggett
☐ Vice Chairman Address: 27 Main Street
☒ Director Burlington, VT 05401
☒ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Timothy Herr
☐ Vice Chairman Address: 27 Main Street
☐ Director Burlington, VT 05401
☐ President _____
☐ Vice President _____
☒ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

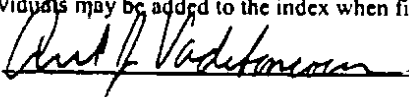
☐ Chairman Name: Timothy Sullivan
☐ Vice Chairman Address: 27 Main Street
☒ Director Burlington, VT 05401
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other COO ☐ Other _____

☐ Chairman Name: Mark Forbes
☐ Vice Chairman Address: 27 Main Street
☒ Director Burlington, VT 05401
☐ President _____
☐ Vice President _____
☐ Secretary ☒ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Ariel Vadeboncoeur
☐ Vice Chairman Address: 27 Main Street
☐ Director Burlington, VT 05401
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other Asst. Secretary ☐ Other _____

☐ Chairman Name: Benjamin Whitehouse
☐ Vice Chairman Address: 27 Main Street
☒ Director Burlington, VT 05401
☐ 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. Ariel Vadeboncoeur, Assistant Secretary
(Typed or printed name and capacity of person signing application)

**VERMONT SECRETARY OF STATE****Corporations Division**

MAILING ADDRESS: Vermont Secretary of State, 128 State Street, Montpelier, VT 05633-1104

DELIVERY ADDRESS: Vermont Secretary of State, 128 State Street, Montpelier, VT 05633-1104

PHONE: 802-828-2584

WEBSITE: www.sec.state.vt.us

FILING NUMBER: 0002125335

FILING DATE: 2/18/2016

EFFECTIVE DATE: 2/18/2016



State of Vermont
Department of Financial Regulation
1784
89 Main Street
Montpelier, VT 05602-3101
www.dfr.vermont.gov

For consumer assistance
[All Insurance] 800-964-

[Securities] 877-550-3907
[Banking] 888-568-4547

Recreation Risk Retention Group, Inc. X
X Certificate of General Good
X
(a proposed restricted corporation for X
captive insurance) X

WHEREAS, the Commissioner of the Department of Financial Regulation (hereafter the Commissioner) received a Petition pursuant to 8 V.S.A., Section 6006(d) from the above-captioned proposed corporation, to issue thereto a Certificate of General Good; and

WHEREAS, the Commissioner has considered the facts and circumstances surrounding this Petition, including; the character, reputation, financial standing and purposes of the proposed incorporators; the character, reputation, financial responsibility, insurance experience and business qualifications of the proposed officers and directors; and all other facts that the Commissioner has deemed advisable in her review of the Petition;

NOW THEREFORE, pursuant to the provisions of 8 V.S.A. Section 6006 and based upon the Commissioner's review and consideration of the facts and circumstances surrounding the Petition, all of which are herein incorporated by reference, the Commissioner does hereby find that the proposed corporation, **Recreation Risk Retention Group, Inc.** will promote the general good of the State of Vermont and does issue this Certificate of General Good as evidence thereof.

IN WITNESS WHEREOF, I
have set my hand, and
affixed the official seal of
the Department of Financial
Regulation, this 18th day of
February.

DAVID F. PROVOST
DEPUTY COMMISSIONER
CAPTIVE INSURANCE

CERTIFICATE VALID WITH WATERMARK

Banking
802-828-3307

Insurance
802-828-3301

Captive Insurance
802-828-3304

Securities
802-828-3420

STATE OF VERMONT
OFFICE OF SECRETARY OF STATE

CERTIFICATE OF RECORD

I Sarah Copeland Hanzas, Secretary of the State of Vermont, do here certify that the attached is true copy of the business documents of the entity named below as filed in the office.

RECREATION RISK RETENTION GROUP, INC.

a Domestic Profit Corporation, formed under the laws of the State of Vermont, initially filed for record with this office on 02/18/2016

June 29, 2023



Given under my hand and the seal
of the State of Vermont, at
Montpelier, the State Capital

A handwritten signature in black ink, appearing to read "Sarah Copeland Hanzas".

Sarah Copeland Hanzas
Secretary of State

Business ID: 0312293
Certificate Number: 2014120687001