

Document Number Only

F96000001268

CT CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301 222-1022

City

State

Zip

Phone

CHIEF OF BUREAU
Tallahassee, FL 32301
*****70.00 *****70.00

CORPORATION(S) NAME

NCC Insurance Company

☒ Profit

☐ NonProfit

☐ Amendment

☐ Merger

☒ Foreign

☐ Dissolution/Withdrawal

☐ Mark

☐ Limited Partnership

☐ Annual Report

☐ Other

☐ Reinstatement

☐ Reservation

☐ Change of R.A.

☐ Fic. Name

☐ Certified Copy

☐ Photo Copies

☐ CUS

☐ Call When Ready

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☐ After 4:30

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Verifier
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W.P. Verifier

3-10

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4/3/12

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SECTION 5502
DATE OF FILING
95 MAR 12 PM 1:45

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION
TRANSACTION BUSINESS IN FLORIDA**

**IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACTION BUSINESS IN THE
STATE OF FLORIDA:**

1. MT TARRARA COMPANY
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Delaware
(State or country under the law of which it is incorporated)
3. 13-3849440
(FEI number, if applicable)
4. 8/16/93
(Date of Incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. None transacted Upon Publication
(Date first transacted business in Florida. (See sections 607.1501, 607.1502 and 617.156, F.S.))
7. 200 Park Avenue - 33rd Floor
New York, NY 10166
(Current mailing address)
8. Any lawful act or activity for which corporations may be organized.
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent:

Name: C T CORPORATION SYSTEM
Office Address: c/o C T Corporation System, 1200 South Pine Island Road
Plantation, Florida, 33324
(Zip Code)

10. Registered agent 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.

C T CORPORATION SYSTEM

Margaret Bertman
(Registered agent's signature) (Officer)

Margaret Bertman, Asst. Secretary

(Type name and Title of Officer)

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SECRETARY OF STATE
CORPORATION DIVISION
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11. 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.

12. Names and addresses of officers and/or directors:

A. DIRECTORS

Chairman: see attached list of Directors

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: see attached list of Officers

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

NCC TANZANIA COMPANY

LIST OF OFFICERS & DIRECTORS

Name	Title	Address
RICHARD E. LUCEY	President & Director	200 Park Avenue New York, NY 10166
PETER D. RUTHENFORD	Vice President - Asset Management & Director	200 Park Avenue New York, NY 10166
MICHAEL D. FLYNN	Vice President - General Counsel, Secretary & Director	200 Park Avenue New York, NY 10166
C. WESLEY REYNOLDS	Vice President	200 Park Avenue New York, NY 10166
RICHARD F. KRAKOWSKI	Vice President, Treasurer & Comptroller	200 Park Avenue New York, NY 10166
MARVA M. LEVINE	Asst. Secretary	200 Park Avenue New York, NY 10166
JOSEPH A. TOMITZ	Asst. Treasurer	200 Park Avenue New York, NY 10166
ROSLYN G. GRIGOLEIT	Asst. Comptroller	200 Park Avenue New York, NY 10166
RICHARD WEISS	Asst. Comptroller	200 Park Avenue New York, NY 10166
CHRISTINE A. HILLERY	Asst. Comptroller	200 Park Avenue New York, NY 10166

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. *Michael D. Flynn*
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Michael D. Flynn, Vice President
(Typed or printed name and capacity of person signing application)

State of Delaware
Office of the Secretary of State

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NCC TARZANA COMPANY" 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 EIGHTH DAY OF MARCH, A.D. 1996.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 12 PM 1:45



Edward J. Freel
Edward J. Freel, Secretary of State

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AUTHENTICATION

DATE

7858244

03-08-96