

Document Number Only

F970000006392

C T CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, Florida 32301

City

State

Zip

Phone

CORPORATION(S) NAME

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Oxford Specialty Management (F/I), Inc.

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| <input checked="" type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> NonProfit | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> Foreign | <input type="checkbox"/> Reservation | <input type="checkbox"/> Change of R.A. |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Fictitious Name | <input type="checkbox"/> CUS |
| <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Photo Copies | |
| <input type="checkbox"/> Limited Liability Partnership | | |
| <input type="checkbox"/> Certified Copy | | |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call if Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

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THANKS, MELANIE

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. Oxford Specialty Management (FL), Inc.
(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. 06-1456174
(FEI number, if applicable)
4. 5/22/96
(Date of Incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. Upon qualification
(Date first transacted business in Florida. (See sections 607.1501, 607.1502 and 817.156, F.S.))
7. 800 Connecticut Avenue
Norwalk, CT 06854
(Current mailing address)
8. To engage in 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) under Florida General Corporation Act.
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

Linda Weinberger
(Registered agent's signature) (Officer)

LINDA WEINBERGER, Asst. Secy.
(Type Name and Title of Officer)

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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 and Officers)

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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B. OFFICERS

President: _____ (See attached list of Directors and Officers)

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. Todd S. Farha
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Todd Farha, President
(Typed or printed name and capacity of person signing application)

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EXHIBIT "A"
LIST OF OFFICERS

<u>NAME</u>	<u>TITLE</u>	<u>RESIDENCE ADDRESS</u>	<u>BUSINESS ADDRESS</u>
Stephen F. Wiggins	Chairman	8 Butler's Island Road Darien, CT 06820	800 Connecticut Avenue Norwalk, CT 06854
Todd Farha	President/Chief Executive Officer	135 Rowayton Avenue, Apt. 1 Norwalk, CT 06853-1428	800 Connecticut Avenue Norwalk, CT 06854
David B. Snow, Jr.	Vice President	10 Tokeneke Trail Darien, CT 06820	800 Connecticut Avenue Norwalk, CT 06854
Jeffery H. Boyd	Vice President	34 Brookridge Drive, Greenwich, CT 06830	800 Connecticut Avenue Norwalk, CT 06854
Brendan R. Shanahan	Treasurer	14 Twin Walls Lane Weston, CT 06883	800 Connecticut Avenue Norwalk, CT 06854
Scott M. Schwartz	Secretary	37 Poverty Hollow Road Newtown, CT 06470	800 Connecticut Avenue Norwalk, CT 06854
Karen Mulroe	Assistant Secretary	40 Ivy Hill Road Ridgefield, CT 06877	800 Connecticut Avenue Norwalk, CT 06854

LIST OF DIRECTORS

<u>NAME</u>	<u>TITLE</u>	<u>RESIDENCE ADDRESS</u>	<u>BUSINESS ADDRESS</u>
Stephen F. Wiggins	Director	8 Butler's Island Road Darien, CT 06820	800 Connecticut Avenue Norwalk, CT 06854
Jeffery H. Boyd	Director	34 Brookridge Drive, Greenwich, CT 06830	800 Connecticut Avenue Norwalk, CT 06854
David B. Snow, Jr.	Director	10 Tokeneke Trail Darien, CT 06820	800 Connecticut Avenue Norwalk, CT 06854

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 "OXFORD SPECIALTY MANAGEMENT (FL), INC." 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 SECOND DAY OF DECEMBER, A.D. 1997.

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.

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A handwritten signature in cursive script, reading "Edward J. Freel".

Edward J. Freel, Secretary of State

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AUTHENTICATION:

DATE:

8784736

12-02-97