

TRANSMITTAL LETTER

F98000005750

TO: QUALIFICATION/TAX LIEN SECTION
DIVISION OF CORPORATIONS

SUBJECT: GSA 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", 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:

William Slome, CPCU

(Name of Person)

Director, Regulatory Compliance

(Firm/Company)

999 Stewart Avenue

(Address)

Bethpage, NY 11714-3551

(City, State and Zip Code)

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Should you need to call someone concerning this matter, please call:

Jennifer Esposito

(Name of Person)

at (516) 393 4787

Area Code & Daytime Telephone Number

COURIER ADDRESS:

Qualification/Tax Lien Sec.
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Sec.
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 OCT 15 AM 9:48
10/15

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO
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. GSA Insurance 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. New Jersey
(State or country under the law of which it is incorporated)
3. 22-2530359
(FEI number, if applicable)
4. January 31, 1984
(Date of Incorporation)
5. perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. not applicable
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.))
7. 999 Stewart Avenue
Bethpage, NY 11714-3551
(Current mailing address)
8. property/casualty insurance
(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: Insurance Commissioner
Office Address: Capitol
Tallahassee, Florida, 32399-0340
(Zip Code)

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10. 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.

Insurance Commissioner
(Registered agent's signature)

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: (Street address ONLY- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Director
~~Chairman~~: John D. Reiersen
Address: 999 Stewart Avenue

Bethpage, NY 11714-3551

Director
~~Chairman~~: Philbert Nezamooden

Address: 999 Stewart Avenue

Bethpage, NY 11714-3551

Director: Robert M. Wallach

Address: 999 Stewart Avenue

Bethpage, NY 11714-3551

Director: William Wallach

Address: 999 Stewart Avenue

Bethpage, NY 11714-3551

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: John D. Reiersen

Address: 999 Stewart Avenue

Bethpage, NY 11714-3551

Vice President: Jasper J. Jackson

Address: 999 Stewart Avenue

Bethpage, NY 11714-3551

Secretary: Philbert Nezamooden

Address: 999 Stewart Avenue

Bethpage, NY 11714-3551

Treasurer: Michelle Masotti

Address: 1055 Stewart Avenue

Bethpage, NY 11714-3551

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

13. John D. Reiersen
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. John D. Reiersen, President
(Typed or printed name and capacity of person signing application)

GSA Insurance Company 22-2530359

Directors (continued):

Lawrence S. Isaacs	999 Stewart Avenue	Bethpage, NY 11714-3551
Roy DiVittorio	999 Stewart Avenue	Bethpage, NY 11714-3551
Michelle Masotti	1055 Stewart Avenue	Bethpage, NY 11714-3551
Jasper J. Jackson	999 Stewart Avenue	Bethpage, NY 11714-3551

Officers (continued):

Robert M. Wallach, Vice President	999 Stewart Avenue	Bethpage, NY 11714-3551
Hylan T. Hubbard, III, Vice President	999 Stewart Avenue	Bethpage, NY 11714-3551
Marc Buro, Vice President	999 Stewart Avenue	Bethpage, NY 11714-3551
Marie Grossman, Vice President	200 Metroplex Drive,	Edison, NJ 08817
Stephen T. Kelly, Vice President	1055 Stewart Avenue	Bethpage, NY 11714-3551
Lisa Drillich, Assistant Secretary	999 Stewart Avenue	Bethpage, NY 11714-3551

CERTIFICATE OF COMPLIANCE



State of New Jersey
DEPARTMENT OF BANKING AND INSURANCE
PO Box 325
TRENTON NJ 08625-0325
(609) 292-5360

CHRISTINE TODD WHITMAN
Governor

September 24, 1998

I, Jaynee LaVecchia, Acting Commissioner of Banking and Insurance of the State of New Jersey, do hereby certify, depose and say that:

1. The GSA Insurance Company, Edison, New Jersey, is a corporation organized under the laws of the State of New Jersey on January 31, 1984, and commenced business in said State on June 1, 1984;
2. The home office of said Company is located at 200 Metroplex Drive, Edison, New Jersey 08817, and the name of the agent therein and in charge thereof upon whom process may be served against said corporation is Gary Ropiecki;
3. Said Company is presently authorized to transact in the State of New Jersey the kinds of insurance specified in paragraphs "b*" and "e**" of N.J.S.A. 17:17-1, a certified copy of the relevant section of the statute is attached for your information. (*Except that paragraph "b" specifically excludes the authority to write policies of aircraft insurance) and (**paragraph "e" specifically excludes the authority to write policies of workers' compensation or employers' liability insurance.)
4. Said Company is in good standing and having complied with all the requirements of the New Jersey statutes is authorized to transact the business of insurance in the State of New Jersey in accordance with and pursuant to all the provisions of its charter and the laws of this State as provided in its currently effective Certificate of Authority issued by this Department;
5. As reported in its sworn Annual Statement as of December 31, 1997, the Company had a Common Capital Stock of \$1,200,000, Gross Paid In and Contributed Surplus of \$5,150,000, an Unassigned Fund (Surplus) Aggregating \$-4,408,211, or a total Surplus as Regards Policyholders of \$1,941,789;

I further certify that the GSA Insurance Company is not precluded by its charter or the laws of this State from engaging in the classes of business stated above in states other than New Jersey, upon compliance with the laws of such other states.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal, at Trenton, the day and year first above written.

Jayne LaVecchia
Acting Commissioner of Banking and Insurance

98 OCT 15 AM 9:49
JAYNEE LAVECCHIA
Acting Commissioner
SECRETARY OF STATE
DIVISION OF CORPORATIONS
FILED