Qualification/Tax Lien Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314

Re: Strategic Risk and Insurance Services, Inc.

Dear Sir/Madam:

On behalf of the above referenced entity, we have enclosed for filing the following documents:

1. Transmittal Letter;

- 2. Application by Foreign Corporation for Authorization to Transact Business in Florida, and
- 3. A check in the amount of \$78.75 for the filing fee and Certificate of Status.

Please acknowledge receipt of this filing by date stamping the photocopy of this Letter and returning it to me in the self-addressed, self-stamped envelope enclosed. Thank you for your assistance in this matter.

Sincerely,

Shirley Abraham

Paralegal

Enclosures

cc:

Heidi A. Scheller Lauren M. Guillette

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PILED

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SECRETARY OF SIATE



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

August 16, 1999

SHIRLEY ABRAHAM, PARALEGAL BOSTON FINANCIAL 101 ARCH STREET BOSTON, MA 02110-1106

SUBJECT: STRATEGIC RISK AND INSURANCE SERVICES, INC.

Ref. Number: W99000018955

We have received your document for STRATEGIC RISK AND INSURANCE SERVICES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word _"perpetual", if a specific date of dissolution or term of existence has not been specified.

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

A certificate of existence, 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.

The certificate we require is not specific to insurance, but a statement from the office you filed with to become incorporated. The certificate must state that the corporation has been formed and remains active on their records.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6958.

Lee Rivers Document Specialist

Letter Number: 699A00041242



101 ARCH STREET BOSTON, MA 02110-1106 617.439.3911 tel www.bosfin.com

Boston

New York Salt Lake City

August 26, 1999

Lee Rivers Qualification Tax Lien Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314

Re: Strategic Risk and Insurance Services, Inc.

Dear Sir/Madam:

Enclosed please find the completed Application By Foreign Corporation For Authorization to Transact Business In Florida with attachments.

Please do not hesitate to contact me if you have any questions. My direct line is (617) 772-9576.

Sincerely

Shirley Abraham

Paralegal

cc:

Heidi A. Scheller Lauren M. Guillette

Enclosures

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

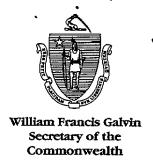
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

Name of corpora	ic Risk and Insurance Section; must include the word "INCO ations of like import in language as partnership if not so contained in the	ORPORATED", "(will clearly indicate)	ate that it is a corporation instead of a	<u>.</u>
Massach	usetts	3	04-3253053	
State or country	under the law of which it is incorpo	rated)	(FEI number, if applicable)	
11-15-94		5. <u>parties</u>	- Perpetual	-
	of incorporation)	(Duration:	Year corp. will cease to exist or "perpe	tual")
	Upon Qualification			
(Date first	transacted business in Florida.) (SE	E SECTIONS 60	7.1501, 607.1502 and 817.155, F.S.)	
101 Arc	ch Street			
	, MA 02110			
Boston		ailing address)		····
Name and str	eet address of Florida register		. Box or Mail Drop Box <u>NOT</u> accep	27 PM 12: 40
fice Address:	1200 South Pine Islan	nd Road		TATE PRIBE
fice Address:			, Florida, 33324 (Zip code)	TATE
-	Plantation ngent's acceptance:		(Zip code)	> '``
Registered a aving been name is application, I the provisions	Plantation agent's acceptance: ed as registered agent and to acceptance agent and to acceptance agent and to acceptance agent and to acceptance agent agen	t service of proce	(Zip code) Tests for the above stated corporation at the and agree to act in this capacity. I furth to performance of my duties, and I am fan	he place designated her agree to comply

which it is incorporated.

A. DIRECTORS (Street address only - P.O. Box NOT acceptable) Chairman:				
Address:				—
			· ·	
Vice Chairman:				
Address:				_
Director:Michael H. Gladstone	······			
Address: 101 Arch Street			Ŧ	— :
Boston, MA 02110	<u>-</u>		-	
Director: Minot A. Frye			-	-
Address: 101 Arch Street			-	·
Boston, MA 02110 B. OFFICERS (Street address only - P.O. Box NOT acceptable)		-		-
President: Minot A. Frye	 1	_G		
Address: 101 Arch Street	SECK	9 AUG	*****	_ ,
Boston, Ma 02110	ETA:	6 27	**************************************	F-
Vice President: Heidi A. Scheller-Maddrix	33S 16 A	PH		_
Address:101 Arch Street	. ST/	1:2	0	
Boston, Ma 02110	AGI	6		_
Secretary: Michael H. Gladstone				
Address: 101 Arch Street				-
Boston, MA 02110				
Treasurer:				
Address: 101 Arch Street			-	
Boston, MA 02110				-
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)				
	den	+	,	_

<u>.</u>#..



The Commonwealth of Massachusetts

Secretary of the Commonwealth State Kouse, Boston, Massachusetts 02133

July 2, 1999

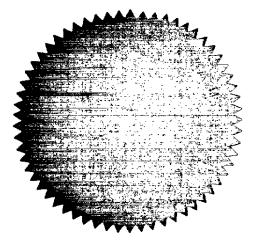
TO WHOM IT MAY CONCERN:

I hereby certify that according to the records of this office

STRATEGIC RISK AND INSURANCE SERVICES, INC.

is a domestic corporation organized on November 15, 1994, under the General Laws of the Commonwealth of Massachusetts.

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156B section 101 for said corporation's dissolution; that articles of 3 dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.

Secretary of the Commonwealth

* This is not a tax clearance. Certificates certifying that all taxes due and payable by the corporation have been paid or provided for are issued by the Department of Revenue.

** MGL Chapter 156B Section 83A provides that certain consolidations and mergers may be filed with the division within thirty days <u>after</u> the effective date of the merger or consolidation.