

F990000006534

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: Insurance Services 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", 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:

Matt P. McClure  
(Name of Person)

500003028375--3  
-10/28/93--01075--008  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

The Seibels Bruce Group  
(Firm/Company)

W99-25063

1501 Lady Street  
(Address)

Columbia SC 29201  
(City/State/Zip)

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

Stuart Lee  
(Name of Person)

at ( 803 ) 748-2217  
(Area Code & Daytime Telephone Number)

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STREET ADDRESS:

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

MAILING ADDRESS:

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

4mt  
12/20

Enclosed is a check for the following amount:

☐ \$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



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

November 1, 1999

MATT P. MCCLURE  
THE SEIBELS BRUCE GROUP  
1501 LADY STREET  
COLUMBIA, SC 29201

SUBJECT: INSURANCE SERVICES GROUP, INC.  
Ref. Number: W99000025063

We have received your document for INSURANCE SERVICES GROUP, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

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) 487-6097.

Michael Mays  
Document Specialist

Letter Number: 499A00052183

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TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

December 6, 1999

MATT P. MCCLURE  
THE SEIBELS BRUCE GROUP  
1501 LADY STREET  
COLUMBIA, SC 29201

SUBJECT: INSURANCE SERVICES GROUP, INC.  
Ref. Number: W99000025063

We have received your document for INSURANCE SERVICES GROUP, INC. and your check(s) totaling \$. However, the document has not been filed and is being retained in this office for the following:

SIMPLY ADDING FLORIDA TO THE END OF THE NAME IS NOT A DISTINGUISHING DIFFERENCE IN THE NAME; SO THEREFORE YOU WOULD NEED TO ADOPT AN ALTERNATE NAME.

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) 487-6097.

Michael Mays  
Document Specialist

Letter Number: 599A00057285

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**INSURANCE SERVICES GROUP, INC.**


**UNANIMOUS WRITTEN CONSENT OF DIRECTORS**

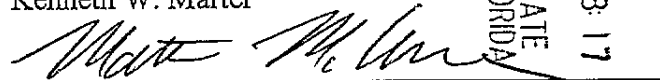
**FLORIDA NAME ADOPTION**


Pursuant to Section 33-8-210 of the South Carolina Business Corporation Act of 1988, as amended, the undersigned, being all of the directors of Insurance Services Group, Inc. (the "Company"), do hereby unanimously consent to and adopt the following resolutions as the actions of the Board of Directors of the Company in lieu of a meeting and hereby direct that this unanimous written consent to such action be filed with the minutes of the proceedings of the Board of Directors of the Company:

**BE IT RESOLVED**, that Insurance Services Group, Inc., organized and existing in the State of South Carolina, hereby adopts the name "Insurance Services Group of South Carolina, Inc." for use in the State of Florida.

**IN WITNESS WHEREOF**, the undersigned have executed this Consent of the Board of Directors as of the 13<sup>th</sup> day of December, 1999.

  
Kenneth W. Marter

  
Matthew P. McClure

  
John E. Natili

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TALLAHASSEE, FLORIDA

**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. Insurance Services Group, 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. South Carolina 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. December 7 1994 5. perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Upon approval of application  
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 1501 Lady Street  
Columbia, SC 29201  
(Current mailing address)

8. Insurance related services  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

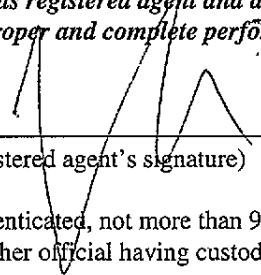
Name: C T CORPORATION SYSTEM

Office Address: 1200 South Pine Island Road

Plantation, Florida, 33324  
(Zip code)

**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.*

  
\_\_\_\_\_  
(Registered agent's signature) **JENNIFER F AULTMAN**  
ASSISTANT SECRETARY

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)

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

Chairman: (see attached list)

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

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

President: (see attached list)

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

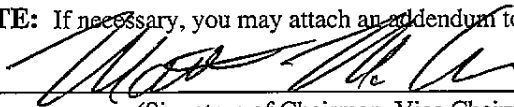
Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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

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

14. Senior Vice President, General Counsel & Corp. Sec.  
(Typed or printed name and capacity of person signing application)  
MATTHEW P. McCLURE

## INSURANCE SERVICES GROUP, INC.

### Directors

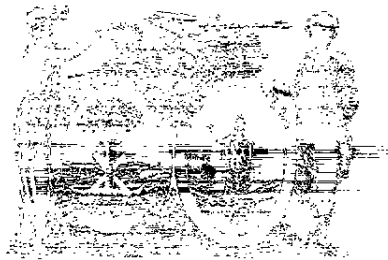
Kenneth W. Marter	1501 Lady Street, Columbia South Carolina 29201
Matthew P. McClure	1501 Lady Street, Columbia South Carolina 29201
John E. Natili	1501 Lady Street, Columbia South Carolina 29201

### Officers

Michael A. Culbertson Chief Executive Officer and President	1501 Lady Street, Columbia South Carolina 29201
Matthew P. McClure Senior Vice President, General Counsel and Corporate Secretary	1501 Lady Street, Columbia South Carolina 29201
Steven J. Groth Treasurer	1501 Lady Street, Columbia South Carolina 29201
Elizabeth R. Monts Controller	1501 Lady Street, Columbia South Carolina 29201
Janet H. Langley Assistant Secretary	1501 Lady Street, Columbia South Carolina 29201

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TALLAHASSEE, FLORIDA

# *The State of South Carolina*



*Office of Secretary of State Jim Miles*

## **Certificate of Existence**

I, Jim Miles, Secretary of State of South Carolina Hereby certify that:

***INSURANCE SERVICES GROUP, INC.,***

a corporation duly organized under the laws of the State of South Carolina on **December 7th, 1994**, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the Corporation that it is subject to being dissolved by administrative action pursuant to Section 33-14-210 of the South Carolina Code, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 22nd day of October, 1999.

A handwritten signature of Jim Miles in cursive script.

Jim Miles, Secretary of State

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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