



M02000000556

ACCOUNT NO. : 072100000032

REFERENCE : 415490 7301440

AUTHORIZATION : Patricia Piquero

COST LIMIT : \$ 125.00

ORDER DATE : February 26, 2002

ORDER TIME : 12:11 PM

ORDER NO. : 415490-020

CUSTOMER NO: 7301440

CUSTOMER: Warren J. Finnell, Esq  
Congdon Flaherty O'callaghan  
377 Oak Street

Garden City, NY 11530

RECEIVED  
02 MAR -1 PM 12: 53  
DEPARTMENT OF STATE  
BUREAU OF CORPORATE  
FINANCIAL SERVICES, FLORIDA

FOREIGN FILINGS

NAME: MCMC LLC

800005032588-0

\*\*\*\*\*FILE 1ST\*\*\*\*\*

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds -- EXT# 1133

EXAMINER: *VP*  
*3-1-02*

02 MAR -1 PM 2: 38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. MCMC LLC  
(Name of foreign limited liability company)

2. Connecticut 3. 80-0007091  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 12/21/2001 5. Perpetual  
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. upon filing  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))

7. Office of the Secretary of State- State of Connecticut  
30 Trinity Street, (P.O. Box 150470) Hartford, CT 06115-0470  
(Street address of principal office)

8. If limited liability company is a manager-managed company, check here

9. The name and usual business addresses of the managing members or managers are as follows:

Wright Risk Management Co. INC. , 377 Oak Street, Suite 101 Garden City, NY 11530

Murdock Claim Management Corporation , 425 Day Hill Road Winsor, CT 06095

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10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: Claim management  
services and third party claim administration services.

*See below*

Signature of a member or an authorized representative of a member.  
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

William J. Fishlinger *William J. Fishlinger* CEO  
Typed or printed name of signee

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

MCMC LLC

2. The name and the Florida street address of the registered agent and office are:

Corporation Service Company

(Name)

1201 Hays Street

Florida street address (P.O. Box **NOT** ACCEPTABLE)

Tallahassee

FL

32301

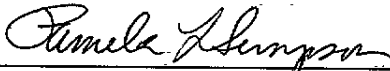
(City/State/Zip)

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TALLAHASSEE, FLORIDA

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*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.*



(Signature)

\$ 100.00 Filing Fee for Application  
\$ 25.00 Designation of Registered Agent  
\$ 30.00 Certified Copy (optional)  
\$ 5.00 Certificate of Status (optional)

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State,  
and keeper of the seal thereof, DO HEREBY CERTIFY, that

MCMC LLC

organized under the laws of Connecticut as a Limited Liability Company,  
was filed in this office on December 21, 2001 and is in existence as of  
the date of this certificate.



Secretary of the State.

Date Issued: February 26, 2002

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