700000 34/age 76f 1

Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H07000151150 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 205-0383

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone

: (850)222-1092

Fax Number

: (850)878-5926

FLORIDA/FOREIGN LIMITED LIABILITY CO. AL

AmWINS Special Risk Underwriters, LLC

Certificate of Status	0	
Certified Copy	0	
Page Count	04	
Estimated Charge	\$125.00	

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

CT CORPORATION SYSTM

9269848098

6/6/2007 69:91 2007/90/90

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

AmWINS Special Risk Underwriters, LLC	
(Name of Foreign	Limited Liability Company)
North Carolina	3, 13-4279669
(Jurisdiction under the law of which foreign limited company is organized)	
5-6-2004	5. perpetual
(Date of Organization)	(Duration: Year fimited liability company will coase to carist or "perpenual")
upon qualification	AS SO ST
(Date first transacted busis	sees in Florida, if prior to registration.) 8.502 F.S. to determine penalty liability)
4064 Colony Road, Suite 450, Charlotte, NC 2821	
,	EC D
(Street	(Address of Principal Office)
751:	· 고 · 콘스트
If limited liability company is a manager-n	namaged company, disor note [2]
The name and usual business addresses of	the managing members or managers are as follows:
M. Steven DeCarlo, 4064 Colony Rd., Suite 450,	Charlotte, NC 28211
Scott Purviance, 4064 Colony Rd., Suite 450, Cha	urlotte NC 28211
Goote I Having your Colony Said Oding 1991 Com	, 10 10 10 10 10 10 10 10 10 10 10 10 10
stody of records in the jurisdiction under the law	no more than 90 days old, duly authenticated by the official having of which it is organized. (A photocopy is not acceptable. If the certificate under eath of the translator must be submitted.)
wholesale insurance brokerage	<u> </u>
Sud-1	
	or an authorized representative of a member.
	8.408(3), F.S., the execution of this document constitutes ties of perjury that the facts stated berein are true.)
SEOT PUR	• • • • • • • • • • • • • • • • • • • •
	r printed name of signee

FLOST - STONOS CT System Children

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:			
AMWINS Special Risk Underwriters, LLC			
2. The name and the Florida street address of the registered agent and office	, ()	2001	
CT Corporation System	RETA AHAS	NIII.	
(Name)	RY OF	6. /	[F]
1200 South Pine Island Road	 	\triangleright	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	DATE	11 5	~
Plantation, Florida 33324		٠,	*
Cirt/State/Zip			

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, Florida Statutes.

C.T. Corporation System

By: Dale W. Monio

(Signature)

DALE W. MORRIS

ASSISTANT VICE PRESIDENT

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

FLATY - BOLGS C.T System Chillin



NORTH CAROLINA Department of The Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

AMWINS SPECIAL RISK UNDERWRITERS, LLC

is a limited liability company duly formed under the laws of the State of North II Carolina, having been formed on the 6th day of May, 2004, with its period of duration being Perpetual.

I FURTHER certify that the said limited liability company's articles of > organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina: that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.



Certification# 86810298-1 Reference# 8672691- Page: 1 of 1 Verify this certificate online at www.secretary.state.nc.us/verification

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Releigh, this 5th day of June,

Secretary of State

Claim I. Marshall

09\09\500\ T2:28