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SECRETARY OF STATE

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M. THOMAS

JAN 26 2009

EXAMINER

9303 New Trails Drive, Suite 400, The Woodlands, Texas 77381 • 281–367–0380 • Fax 281–364–1452 • www.mglconsulting.com

January 16, 2009

Via UPS

Florida Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

RE: Wright Risk Management Company, LLC; Request for Certificate of Authority for Florida.

Dear Sir/Madam:

With regard to the above captioned matter, we would like to request a Certificate of Authority regarding Wright Risk Management Company, LLC. Our client has asked that we handle their insurance agency licensing and state registration with the State of Florida. Therefore, on behalf of our client, enclosed please find the following documents:

- 1. Two (2) Florida authority to transact business Cover Letters;
- 2. Two (2) originally executed Applications by Foreign Limited Liability Company for Authorization to Transact Business in Florida
- 3. Two (2) originally executed Certificate of Designation of Registered Agent/Registered Office forms;
- 4. Two (2) copies of the agency's Officer and Director's list;
- 5. One (1) original Certificate of Good Standing from the state of New York;
- 6. One (1) check #21468 in the amount of \$125.00 to cover the filing fee; and
- 7. One (1) prepaid return UPS envelope for a copy of the filing.

Please return the approved Certificate of Authority in the enclosed UPS envelope to my attention at the following address:

MGL Consulting Corporation Attention: Insurance Division – Dawn Scott 9303 New Trails Drive, Suite 400 The Woodlands, Texas 77381

Should you have any questions regarding this request or require additional documentation, please call me directly.

Sincerely,

Dawn Scott

Licensing Specialist 1

dws

Enclosures (as stated)

Dr



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Wright Risk Management Company, LLC
(Name of Limited Liability Company)
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the following:
Dawn Scott (Name of Person)
(Name of Person)
MGL Consulting Corporation (Firm/Company)
9303 New Trails Drive, Suite 400 (Address)
The Woodlands TX 77381 (City/State and Zip Code)
For further information concerning this matter, please call:
$\frac{\text{Dawn Scott}}{\text{(Name of Person)}} \underbrace{\text{at}(\frac{381}{367-0380} \times 122)}_{\text{(Area Code & Daytime Telephone Number)}}$
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\frac{125.00}{2}\$ \frac{130.00}{2}\$ \frac{130.00}{2}\$ \frac{130.00}{2}\$ \frac{130.00}{2}\$ \frac{135.00}{2}\$ \frac{155.00}{2}\$ \frac{155.00}{2}\$ \frac{1560.00}{2}\$ \frac{160.00}{2}\$

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

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

1. Wright Risk Management Company, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," of	r "LLC")
(Name of 2010igh Emined Elability Company, must metado Elability Company, E.E.C., C	LLC.)
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attac consent of the managers or managing members adopting the alternate name. The alternate name must include Company," "L.L.C.," "LLC.")	h a copy of the writter "Limited Liability
2. New York 3. 26-2903226	
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)	•
4. 04/11/2008 5. Perpetual	
(Date of Organization) (Duration: Year limited liability companexist or "perpetual")	
6. upon approval	EG E
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	JAN 23 PH 12: 59 SECRETARISEE PLORID
7. 333 Earle Ovington Blvd., Suite 505, Uniondale, NY 11553-3624	
	944 54 54 54
(Street Address of Principal Office)	<u> </u>
 If limited liability company is a manager-managed company, check here The name and usual business addresses of the managing members or managers are as fol SEE ATTACHMENT 	lows:
the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign	
SEE ATTACHMENT 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign 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:	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official havir the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign translation of the certificate under oath of the translator must be submitted.)	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official havir the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign 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:	

Typed or printed name of signee

FL057 - 09/14/2007 C.T. Filling Manager Onl

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.

If name unav	ailable, the alternate name t	to be used in the state of Florida i	is: 150 J. F. 25
2. The name	and the Florida street addre	ess of the registered agent and of	fice are: PHY 5
	C T Corporation System		最高
		(Name)	
	1200 South Pine Island Road Florida Street	d Address (P.O. Box <u>NOT</u> ACCEPTABLE))
	Plantation	FL 33324 City/State/Zip	
		2.13. 2	
liability comp agent and agr relating to the	any at the place designated to see to act in this capacity. I f proper and complete perfor my position as registered ag	nd to accept service of process for in this certificate, I hereby accept that the property with the promance of my duties, and I am fame gent as provided for in Chapter 60	the appointment as registe rovisions of all statutes iliar with and accept the
C T Corporatio	. Ojbiem		

\$ 25.00 Designation of Registered Agent

5.00 Certificate of Status (optional)

\$ 30.00 Certified Copy (optional)

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	333 Earle Ovington Blvd., #505 Uniondale, NY 11553-3624 333 Earle Ovington Blvd., #505 Uniondale, NY 11553-3624	333 Earle Ovington Bhd., #505 Uniondale, NY 11553-3624 333 Earle Ovington Bhd., #505 Uniondale, NY 11553-353	333 Earle Ovington Blvd., #505 Uniondale, NY 11553-3624	333 Earle Ovington Bivd., #505 Uniondale, NY 11553-3624	333 Earle Ovington Bivd., #505 Uniondale, NY 11553-3624	333 Earle Ovington Blvd., #505 Uniondale, NY 11553-3624 333 Earle C.	Uniondale, NY 11553-3624				
WRIGHT RISK MANAGEMENT COMPANY, LLC - OFFICERS Jacobson, Gilbert R. AVP	Sims, Steven E. Exec. vp	Fishlinger, William J. Chairman & CEO Fishlinger, Joan VP & Secretary	•	raicone, Ronald VP	VP VP	Marvin, William R. AVP	Exec. VP & Gen. Counse!	Trees. VP	Treasurer	Luley, Robert Exec. Vp	

SECRETARY OF STATE

State of New York Department of State } ss:

I hereby certify, that WRIGHT RISK MANAGEMENT COMPANY, LLC a DELAWARE Limited Liability Company filed an Application for Authority pursuant to the Limited Liability Company Law on 09/30/2008. I further certify that so far as shown by the records of this Department, such Limited Liability Company is still authorized to do business in the State of New York.

* * *

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 14th day of January two thousand and nine.

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