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## **COVER LETTER**

TO:		ation Section of Corporations	s					
SUBJEC		DELIS MARINE	UNDERWRITERS LLC					
SUBJEC	CI:		Name of L	imited Liability C	ompany	<del></del>		
The encl Existence	losed "Aj e, and ch	oplication by Fore	eign Limited Liability Compa I to register the above referer	any for Authorizat	tion to Tran	sact Business in Florida," Certificate of company to transact business in Florid	of la	
Please re	eturn all	correspondence co	oncerning this matter to the f	ollowing:				
		Brenda Anthony	ý					
			Na	me of Person				
		Central Licensii	ng Bureau					
			Fir	m/Company				
		1501 N Univers	sity, Suite 550					
				Address				
		Little Rock, AR	72207					
	City/State and Zip Code							
		tboone@fidelism	arine.com					
	•		E-mail address: (to be used	for future annual	report noti	fication)		
For furt	her infor	mation concerning	g this matter, please call:					
	Brenda	. Anthony - Centra	al Licensing Bureau	501 at (	664-804	14		
		Name o	f Contact Person	Area Code	Dayt	ime Telephone Number		
	Divisio Registra P.O. Bo	NG ADDRESS: n of Corporations ation Section ox 6327 ssee, FL 32314			Division of Registration Clifton Budget 2661 Execution	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301		
Enclose		eck for the follow 5.00 Filing Fee	ing amount:  \$\int\$130.00 Filing Fee &  Certificate of Status	□ \$155.00 Filin Certified Copy	ng Fee &	□ \$160.00 Filing Fee, Certificate of Status & Certified Copy		

1.057N - 9/10/2015 Wolters Kluwer Online

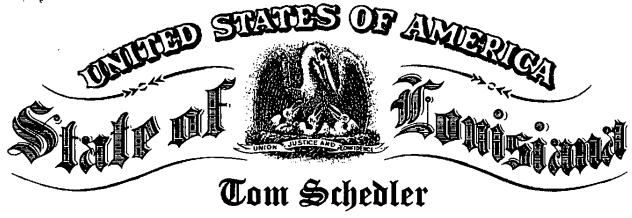
## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

If name unavailable, enter al liability Company," "L.L.C,"	ternate name adopted for the purpose of or "LLC.")	transacting business i	n Florida. The alternate na	me must include "Li
Louisiana	,	3. 80-0421155		
(Jurisdiction under the law company is organized)	of which foreign limited liability	J	(FEI number, if applicable	;)
·				
	(Date first transacted business i (See sections 605.0904 & 605.090	n Florida, if prior to re 15, F.S. to determine p	gistration.) enalty liability)	
2235 N. Hwy 190	· · · · · · · · · · · · · · · · · · ·			_
Covington, LA 70433				- 2
	(Street Address of Prin	cipal Office)		一門三
. 2235 N. Hwy 190				2017 JAN 30
Covington, LA 70433				33
	(Mailing Add	ress)		- 第 3
. Name and street addres	s of Florida registered agent: (P.O.	Box NOT acceptab	le)	FLO
	C T Corporation System		,	<b>是否</b>
Name:				
	1200 South Pine Island Road			
Office Address:				
Office Address:	Plantation	,	Florida 33324	
tegistered agent's accep Javing been named as re	Plantation (City) tance: gistered agent and to accept service	of process for the a	(Zip code)	
Registered agent's accep Having been named as re- lesignated in this applica- o complywith the provision accept the obligations of t	Plantation  (City)  tance:  gistered agent and to accept service  tion, I hereby accept the appointme  ons of all statutes relative to the pro  ny position as registered agent.  C T Corporation Syste  By:  (Registered	of process for the and as registered age per and complete per process of agent's signature)	Tiorida (Zip code)  above stated limited liab  nt and agree to act in the erformance of my dutie	his capacity. I fut
Registered agent's acceptaving been named as refessionated in this applicate complywith the provision complywith the provision of the obligations of the obligations of the name, title or capa	Plantation  (City)  tance:  gistered agent and to accept service  tion, I hereby accept the appointme  ons of all statutes relative to the pro  ny position as registered agent.  C T Corporation Syste  By:	of process for the and as registered age per and complete per process of agent's signature)	Tiorida (Zip code)  above stated limited liab  nt and agree to act in the erformance of my dutie	his capacity. I fut

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

FIDELIS GROUP HOLDINGS LLC, Managing Member, by Theodore Boone, Managing Member



SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that

## FIDELIS MARINE UNDERWRITERS LLC

A limited liability company domiciled in BUSH, LOUISIANA,

Filed charter and qualified to do business in this State on June 05, 2009,

I further certify that the records of this Office indicate the company has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned, is in good standing and is authorized to do business in this State.

I further certify that this certificate is not intended to reflect the financial condition of this company since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

December 29, 2016

Certificate ID: 10780873#D5P83

To validate this certificate, visit the following web site, go to Business Services, Search for Louisiana Business Filings, Validate a Certificate, then follow the instructions displayed.

www.sos.la.gov

Secretary of State
Web 37064630K