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SECRETARY OF SMINISTER OF STATES

TO OR APRIL SEE THE SEE

BLANK, MEENAN & SMITH, P.A.

ATTORNEYS AT LAW

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SHIRLEY KERNS**

INSURANCE REGULATORY CONSULTANT

J. CAMERON YARBROUGH**
DIRECTOR GOVERNMENTAL AFFAIRS

*Florala Bar Certified in Health Law **Not a Member of the Florala Bar

Via Hand Delivery

April 16, 2004

Florida Department of State Division of Corporations 409 East Gaines Street Tallahassee, Florida 32301

Re:

Tower Hill Select Insurance Company

Our File Number: 96.00

Dear Sir or Madam:

Enclosed please find the Articles of Incorporation for Tower Hill Select Insurance Company. We have provided a check for \$87.50 to cover the filing fee and 1 Certified Copy and 1 Certificate of Status. I will need a total of (3) certified copies of the Articles of Incorporation and three (3) Certificates of Status for the above-referenced corporation. Please call me to discuss the fees for obtaining the additional 2 copies and I will arrange to have another check for the remaining amount delivered when the documents are ready.

If you have any questions or if any additional information is required, please do not hesitate to contact our office.

Sincerely,

Stacy L. Small

Paralegal

Enclosure

TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: TOW	er Hill Select Insurance Con	npany	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUIFIX)
Enclosed are an orig	ginal and one (1) copy of the arti	icles of incorporation and	l a check for:
□ \$70.00	\$78.75	\$78.75	\$87,50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
rning rec	& Certificate of Status	& Certified Copy	Certified Copy
	& Certificate of Status	& Ceruneu Copy	& Certificate of
			Status
		ADDITIONAL CO	
		ADDITIONAL CO	DE I REQUIRED
FROM: S	tacy Small, Paralegal - Blan	k, Meenan & Smith	
I KOMI.	Name	(Printed or typed)	
	204 South Monroe Street		
		Address	
	Tallahassee, FL 32301		
	City	, State & Zip	
	850/681-6710		
	Daytime 1	Telephone number	

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION OF

TOWER HILL SELECT INSURANCE COMPANY

The undersigned incorporator(s), all of whom are United States citizens, natural persons over the age of eighteen (18) years, and competent to contract, hereby form a stock insurance company under the laws of the State of Florida.

<u>Article I.</u>

Name. The name of this Corporation is TOWER HILL SELECT INSURANCE COMPANY.

Article II.

<u>Principal Office.</u> The principal place of business shall be in Alachua County, City of Gainesville, Florida and the physical location and mailing address of this corporation shall be: 7201 N.W.11th Place, Gainesville, Florida 32605. The Corporation may establish and maintain the principal place of business at such other place within the State of Florida as may be determined by the Board of Directors from time to time.

Article III.

<u>Duration</u>. The period of duration of this Corporation shall be perpetual.

Article IV.

Purpose. The purpose of this Corporation is to engage in any activities or businesses permitted under the laws of the United States, under the Florida General Corporation Act, and to engage in every aspect of property and casualty insurance and reinsurance as permitted under Florida Insurance law and conducting such other business as may be permitted for such an insurance company under applicable law, and the acquisition of life insurance bonds, debentures, commodities, leaseholds, options, puts and calls, easements, mortgages, properties, notes, mutual funds, investment trusts, common trust funds, voting trust certificates, and any class of stock or right to subscribe for stock, including trading on margin.

Article V.

<u>Capital Stock.</u> This Corporation is authorized to issue 100,000 shares of One Dollar (\$1.00) par value common stock. All shareholders shall have preemptive rights in future stock sales by the Corporation. The Corporation shall not begin transacting insurance until it achieves

capital and surplus of not less than Five Million Dollars (\$5,000,000), or as required by Florida law.

Article VI.

<u>By-Laws</u>. The power to adopt, alter, amend or repeal By-Laws shall be vested in the Board of Directors or Shareholders.

Article VII.

Statutory Agents and Office. The initial registered office of this Corporation shall be 7201 N.W. 11th Place, Gainesville, Florida 32605, and the initial registered agent of this Corporation at such office shall be Jonathon B. Palmquist, who upon accepting this designation agrees to comply with the provisions of Section 48.091, Florida Statutes, as amended from time to time, with respect to keeping an office open to receive service of process from the Chief Financial Officer of the State of Florida.

Article VIII.

<u>Initial Board of Directors.</u> The Corporation shall have five (5) Directors initially, all of whom are United States citizens over the age of 18. The number of Directors may either be increased or diminished from time to time by the By-Laws, but it shall never be less than five. The names and residence addresses of the initial Directors of this Corporation are:

*******	and make a the second s
William J. Shively	608 SW 97 th Terrace, Gainesville, Florida 32607

Donald C. Matz, Jr. 10357 SW 45th Lane, Gainesville, Florida 32608

Jonathon B. Palmquist 3419 SW 93rd Way, Gainesville, Florida 32608

Brian T. Sheekey 8817 SW 61st Avenue, Gainesville, FL 32608

Article IX.

<u>Incorporators.</u> The names and residence addresses of the incorporators, all of whom are United States citizens over the age of 18, are:

William J. Shively 608 SW 97th Terrace, Gainesville, Florida 32607

Phillip M. Thomasson 3857 SW 93rd Terrace, Gainesville, Florida 32608

Donald C. Matz, Jr.

10357 SW 45th Lane, Gainesville, Florida 32608

Jonathon B. Palmquist

3419 SW 93rd Way, Gainesville, Florida 32608

Brian T. Sheekey

8817 SW 61st Avenue, Gainesville, FL 32608

Article X.

Transactions In Which Directors or Officers Are Interested.

- A. No contract or other transaction between the corporation and one or more of its directors or officers, or between the corporation and any other corporation, firm, or entity in which one or more of the corporation's directors or officers are directors or officers, or have a financial interest, shall be void or voidable solely because of such relationship or interest, or solely because such director or directors is or are present at or participate in the meeting of the Board of Directors or a committee thereof which authorizes, approves, or ratifies such contract or transaction, or solely because his or their votes are counted for such purpose, if:
- 1. The fact of such relationship or interest is disclosed or known to the Board of Directors or the committee which authorizes or approves the contract or transaction; or
- 2. The fact of such relationship or interest is disclosed or known to the shareholders of the corporation entitled to vote thereon, and they authorize or approve such contract or transaction; or
 - 3. The contract or transaction is fair and reasonable as to the corporation.

ARTICLE XI.

<u>Indemnification</u>. The Corporation shall defend, indemnify and hold harmless its directors, officers, and agents against liabilities arising out of their respective services and duties to the Corporation. Indemnification will be made for costs and expenses, including attorney fees, judgments, and settlement payments.

[signatures on following page]

The Incorporators have hereunto set their hands and signature this D day of Mr. 2004.

Withiam J. Shively

Phillip M. Thomasson

Donald C. Matz, J.

Jonathon B. Palmauist

Brian T. Sheekey

STATE OF FLORIDA COUNTY OF ALACHUA

I HEREBY CERTIFY that on this day personally appeared before me, the undersigned authority, William J. Shively, personally known to me to be the person who executed the foregoing instrument and acknowledged before me that he or she executed the same freely and voluntarily for the uses and purposes therein set forth.

IN WITNESS WHEREOF, I have set my hand and official seal on this 30 day of 11/2004.

Inotary Public
My Commission Expires: 7/10/2005

STATE OF FLORIDA. COUNTY OF ALACHUA

I HEREBY CERTIFY that on this day personally appeared before me, the undersigned authority, Phillip M. Thomasson, personally known to me to be the person who executed the foregoing instrument and acknowledged before me that he or she executed the same freely and voluntarily for the uses and purposes therein set forth.

IN WITNESS WHEREOF, I have set my hand and official seal on this 20 day of 2004.

Notary Public Leather

My Commission Expires: 7/10

Cheryl A. Feather
Commission #DD198675
Expires: Jul 10, 2005 Bonded Thru Atlantic Bonding Co., Inc.

STATE OF FLORIDA COUNTY OF ALACHUA

I HEREBY CERTIFY that on this day personally appeared before me, the undersigned authority, Donald C. Matz, Jr., personally known to me to be the person who executed the foregoing instrument and acknowledged before me that he or she executed the same freely and voluntarily for the uses and purposes therein set forth.

IN WITNESS WHEREOF, I have set my hand and official seal on this 30 day of

My Commission Expires: '7/10/2005

Cheryl A. Feather Commission #DD198675 Expires: Jul 10, 2005 Bonded Thru Atlantic Bonding Co., Inc.

STATE OF FLORIDA COUNTY OF ALACHUA

I HEREBY CERTIFY that on this day personally appeared before me, the undersigned authority, Jonathon B. Palmquist, personally known to me to be the person who executed the foregoing instrument and acknowledged before me that he or she executed the same freely and voluntarily for the uses and purposes therein set forth.

IN WITNESS WHEREOF, I have set my hand and official seal on this day of

Notary Public
My Commission Expires: 7/10/2005



STATE OF FLORIDA COUNTY OF ALACHUA

I HEREBY CERTIFY that on this day personally appeared before me, the undersigned authority, Brian T. Sheekey, personally known to me to be the person who executed the foregoing instrument and acknowledged before me that he or she executed the same freely and voluntarily for the uses and purposes therein set forth.

IN WITNESS WHEREOF, I have set my hand and official seal on this 20 day of

My Commission Expires: 7/10/2005

Cheryl A. Feather Commission #DD198675 Expires: Jul 10, 2005

Bonded Thru Atlantic Bonding Co., Inc.

ACCEPTANCE OF REGISTERED AGENT

Having been named to receive legal process duly served upon and forwarded by the Treasurer and Insurance Commissioner of the State of Florida, and to serve for other purposes as registered agent, for Regency Insurance Company at the place designated in its Articles of Incorporation, the undersigned, Jonathon B. Palmquist, agrees to act in this capacity, agrees to comply with the provisions of Section 48.091 of the Florida Statutes relative to keeping open such office, and is familiar with, and accepts the obligations provided for in, Section 607.0505, Florida Statutes.

STATE OF FLORIDA COUNTY OF ALACHUA

The foregoing Acceptance of Registered Agent for Regency Insurance Company has acknowledged before me this 30th day of 11 facth, 2004, by Jonathon B. Palmquist, who is personally know to me or who has produced a driver's license as identification.

My Commission Expires: 7/0/2015

Cheryl A. Feather Commission #DD198675 Expires: Julia

Bonded Time Atlantic Bonding