

P19000010106

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

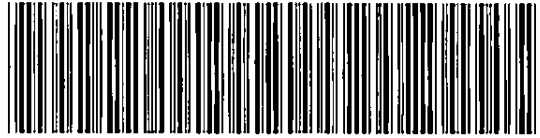
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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: BRIGHT HEALTH INSURANCE COMPANY OF FLORIDA
(PROPOSED CORPORATE NAME – **MUST INCLUDE SUFFIX**)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

Plus 1 additional
Certified Copy
and 1 additional
Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Travis Miller
Name (Printed or typed)

Radey Law Firm, 301 S Bronough Street, Suite 200
Address

Tallahassee, FL 32301
City, State & Zip

850-425-6654
Daytime Telephone number

tmiller@radeylaw.com
E-mail address: (to be used for future annual report notification)

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

APPROVED

FEB 05 2019

ARTICLES OF INCORPORATION

Docketed by: 

**OF
BRIGHT HEALTH INSURANCE COMPANY OF FLORIDA**

THE UNDERSIGNED, in order to form a corporation under and pursuant to the provisions of Section 607.0202 of the Florida Business Corporation Act, hereby states that:

ARTICLE I. The name of the corporation is: Bright Health Insurance Company of Florida.

ARTICLE II. The duration of the corporation is to be perpetual.

ARTICLE III. The street address of the corporation's initial principal office is:

3030 N. Rocky Point Drive, Suite 150A
Hillsborough County
Tampa, FL 33607

ARTICLE IV. The mailing address of the corporation is:

219 North 2nd Street, Suite 310
Minneapolis, MN 55401

ARTICLE V. The purpose for which the corporation is organized is: to conduct the business of a life, accident and health insurance company.

ARTICLE VI. Pursuant to Section 628.121, Florida Statutes, the corporation shall maintain capital and surplus in an amount sufficient to comply with Sections 624.407 and 624.408, Florida Statutes, and other applicable provisions of the Florida Insurance Code, as may be amended from time to time.

ARTICLE VII. The corporation shall have authority to issue 100,000 shares of common stock with a par value of Ten Dollars (\$10.00) per share.

ARTICLE VIII. The corporation shall be governed by a board of directors and the number of directors to constitute the board of directors is five (5). Each initial director shall serve for a term of one (1) year. Pursuant to Section 628.231(3), Florida Statutes, the majority of directors shall be citizens of the United States.

ARTICLE IX. Pursuant to Section 624.422, Florida Statutes, as amended from time to time, the corporation's registered agent shall be the Chief Financial Officer of the State of Florida, whose address at the time of adoption of these Articles is as follows:


Chief Financial Officer
200 E. Gaines Street
Tallahassee, FL 32399

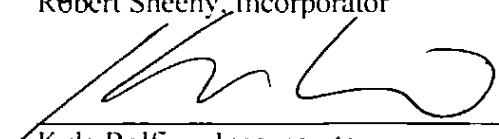
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STATE OF FLORIDA
TALLAHASSEE, FLORIDA


ARTICLE X. The names and residence street addresses of the Incorporators, all of whom are over the age of eighteen and United States citizens, are:


Robert Sheehy	5805 Mait Lane, Edina, MN 55436
Kyle Roling	5816 Northwood Drive, Edina, MN 55436
Tomas Valdivia	5027 Nob Hill Drive, Edina, MN 55439
Brian Beutner	810 Westwood Drive South, Golden Valley, MN 55416
Donald Powers	2229 Village Terrace, Bloomington, MN 55431

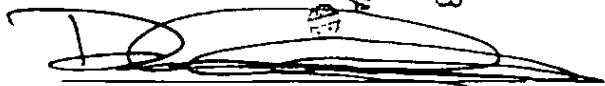
We submit this document and affirm that the facts stated herein are true. We are aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S.


Robert Sheehy, Incorporator


Kyle Roling, Incorporator


Tomas Valdivia, Incorporator


Brian Beutner, Incorporator


Donald Powers, Incorporator

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STATE OF FLORIDA
DEPARTMENT OF STATE
TALLAHASSEE

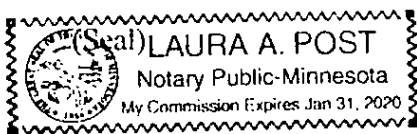
STATE OF Minnesota:

: SS.

COUNTY OF Hennepin:

The foregoing instrument was acknowledged before me this 2nd day of February,

2019, by Robert Sheehy.



Handwritten signature of Laura A. Post in black ink.

Notary Public

My Commission Expires:

1/31/20

Personally Known X

or Produced Identification _____

Type of Identification Produced _____

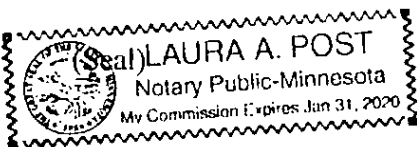
STATE OF Minnesota:

: SS.

COUNTY OF Hennepin:

The foregoing instrument was acknowledged before me this 2nd day of February,

2019, by Kyle Roling.



Handwritten signature of Laura A. Post in black ink.

Notary Public

My Commission Expires:

1/31/20

Personally Known X

or Produced Identification _____

Type of Identification Produced _____

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COUNTY OF HENNEPIN
TALLAHASSEE FLORIDA

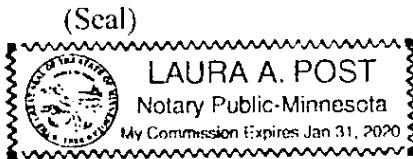
STATE OF Minnesota :


: ss.

COUNTY OF Hennepin:

The foregoing instrument was acknowledged before me this 2nd day of February,

2019, by Tomas Valdivia.





Notary Public

My Commission Expires: 1/31/20

Personally Known X
or Produced Identification _____
Type of Identification Produced _____

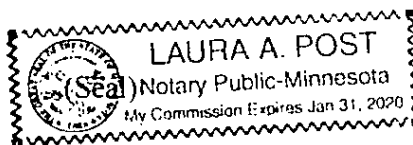
STATE OF Minnesota :


: ss.

COUNTY OF Hennepin:

The foregoing instrument was acknowledged before me this 2nd day of February,

2019, by Brian Beutner.





Notary Public

My Commission Expires: 1/31/20

Personally Known X
or Produced Identification _____
Type of Identification Produced _____

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STATE OF MINN.
DAVID HANSEN, CLERK

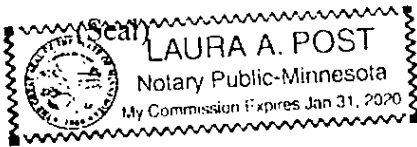
STATE OF Minnesota :

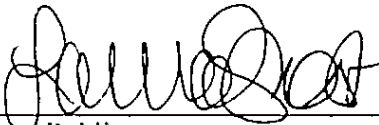
: ss.

COUNTY OF Hennepin:

The foregoing instrument was acknowledged before me this 2nd day of February.

2019, by Donald Powers.





Notary Public
My Commission Expires: 1/31/20

Personally Known X

or Produced Identification _____

Type of Identification Produced _____

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SECRETARY OF STATE
HALL
ST. PAUL, MN