P 960000 46207 LEBOEUF, LAMB, GREENL & MAIRAE

L. L. P.
A LIMITED CIABILITY PARTICULAR IN INCLUDING PROFESSIONAL CORPORATIONS

MEM YORK
WABHINGTON
ALUANY
BOBTON
DENVER
HARRIBBURG

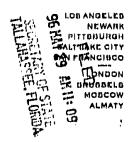
JACKBONVILLE:

HARTFORD

125 WEST 55TH STREET NEW YORK, NY 10019-5389

> IRIRI 484-0000 PACBIMICCI IRIRI 484-0000

WRITER'S DIRECT DIAL.



May 24, 1996

YIA FEDEX

Department of State Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 400001841814 -05/29/96--01002--018 ****181.25 ****131.25

Re: Filing of Articles of Incorporation for Florida Select Insurance Company

Dear Sir or Madam:

On behalf of Florida Select Insurance Company ("FSIC"), we are submitting the following:

- (1) One original and one copy of the executed Articles of Incorporation for FSIC.
- (2) Certificate of Designation of Registered Agent/Registered Office designating the State Treasurer and Insurance Commissioner as the registered agent pursuant to Section 624.422 Florida Statutes.
- (3) Check made payable to the Department of State in the amount of \$131.25.
- (4) Transmittal Letter indicating address of FSIC.

Upon processing of this request, please send the certified Articles of Incorporation and Certificate of Status to

Department of State May 24, 1996 Page 2

my attention at the address listed above. Please do not hesitate to contact me at 212-424-8598 if you have any questions or problems.

Sincerely,

: Saphene Lisaker

Stophanie L. Scherr Not Admitted

ARTICLES OF INCORPORATION OF FLORIDA SELECT INSURANCE COMPANY

The undersigned incorporators to these Articles of Incorporation, natural persons over the age of 18 years, competent to contract and the majority of whom are citizens of the United States of America, hereby form a stock insurance corporation under the laws of the State of Florida.

ARTICLE J. MAME

The name of this Corporation shall be: Florida Select Insurance Company. The street address of the initial principal office is: c/o Panza, Maurer, Maynard & Neel, P.A., 215 South Monroe Street, Suite 320, Tallahassee, Florida 32301, and the mailing address of this Corporation is: c/o Panza, Maurer, Maynard & Neel, P.A., 215 South Monroe Street, Suite 320, Tallahass..., Florida 32301.

ARTICLE II - NATURE OF BUSINESS

The purpose of this Corporation is to engage in every aspect of property and casualty insurance.

ARTICLE III - CAPITAL STOCK

The maximum number of shares of stock that this Corporation is authorized to issue is 1000 shares of common stock having a par value of \$1.00 per share. The amount of paid-in capital and surplus with which this Corporation shall begin shall not be less than \$1000.00 capital and \$4,999,000.00 surplus.

ARTICLE IV - TERM OF EXISTENCE

Inis Corporation shall exist perpetually.

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The initial registered office of this Corporation shall be CT Corporation System, 1200 South Pine Island Road, Plantation, Florida 33324, and the initial registered agent of this Corporation at such office shall be CT Corporation System, who upon accepting this designation agrees to comply with the provisions of Section 48.091, Fiorida Statutes, as amended from time to time, with respect to keeping an office open to receive service of process from the Treasurer and Insurance Commissioner of the State of Florida.

ARTICLE VI - DIRECTORS

This Corporation shall have five directors initially, the majority of whom are United States citizens and all of whom are over the age of 18. The names and residence street addresses of the directors whose initial terms of office shall be for one year are:

Adam M. Mizel 100 West 83th Street, PH5 New York, New York 10024

David L. Wasserman 14 Cabriolet Lane Melville, New York 11747

G. Terrence Van Gilder 1864 Doris Drive Menlo Park, California 94025

G. Thompson Hutton 2 Santiago Avenue Atherton, California 94027

Frederick B. Karl 859 Seddon Cove Way Tampa, Florida 33602

ARTICLE VIL - INCORPORATORS

The names and residence street addresses of the incorporators, the majority of whom are United States citizens and all of whom are over the age of 18, are:

Adam M. Mizel 100 West 89th Street, PH5 New York, New York 10024

David L. Wasserman 14 Cabriolet Lane Melville, New York 11747

G. Terrence Van Gilder 1864 Doris Drive Menlo Park, California 94025

G. Thompson Hutton 2 Santlago Avenue Atherton, California 94027

Frederick B. Karl 859 Seddon Cove Way Tampa, Florida 33602

THE INCORPORATORS have her April, 1996. Lilli Adam M. Mizel	cunto set their hands and seals this $8t$ day of
David L. Wasserman	
G. Terrence Van Gilder	
G. Thompson Hutton	
Frederick B. Karl	

PERSONALLY APPEARED before me, Adam M. Mizel, who acknowledged executing the above Articles of Incorporation of Florida Select Insurance Company.

My commission expires:
April 30,1996

THE INCORPORATORS have herounto set their hands and seals this 8thday of April 1996.
Adam M. Mizel
David L. Wasserman
G. Terrence Van Gilder
G. Thompson Hutton
Frederick B. Karl

STATE OF NEVADA

PERSONALLY APPEARED before me, David L. Wasserman, who acknowledged executing the above Articles of Incorporation of Florida Select Insurance Company.

Notary Public

State of NEVADA

My commission expires:

OCT 1, 1999



WILLIE J. HADDOCK Notary Public - Nevada My appt. exp. Oct. 1, 1999 No. 95-00955-1 THE INCORPORATORS have hereunto set their hands and seals this Aday of April, 1996.

Adam M. Mizel

David L. Wasserman

G. Terrence Van Gilder

G. Thompson Hutton

Frederick B. Karl

State of California		OPTIONAL SECTION
San Mateo	_	CAPACITY CLAIMED BY SIGNER
	<u> </u>	Though space does not reques the Notary to fill in the case below, doing so may prove
On 4/12/96 before me.	Karen Gates, notary public	Make the persons reying on the document
DATE	NAME, TITLE OF OFFICER - E.G., "JANE DOE, NOTARY PUBLIC"	Composition of the contraction o
personally appeared 6. Terrenc	G. Terrence Van Gilder & G. Thompson Hutton	
· · · · · · · · · · · · · · · · · · ·	NAME(S) OF SIGNEP(S)	TT.ES.
	illy known to me - OR - I proved to me on the basis of satisfactory evidence	1 PARTNER(S) UMITED
	to be the person(s) whose name(s) is/are	C GENERAL
	subscribed to the within instrument and ac-	☐ ATTCPNEY-IN-FACT
	knowledged to me that he/she/they executed	THUSTEE(S)
	the same in his/her/their authorized	GUAPDIANCONSERVATOR
TANK GITS	capacity(ies), and that by his/her/their	Operation Contracts
Comn. 8 16372	·w	
A THE CONTRACT OF THE PARTY OF	'A'	
A COURT LANGE MAY 6, 135	the person(s) acred, executed the instrument.	
	WITNESS my hand and official seal.	NIGHER IS HEPPRESENTING:
	4) 1	
	SEATTLE CHANTARY	
THIS CERTIFICATE MUST BE ATTACHED TO THE DOCUMENT DESCRIBED AT DICHT.	TITLE OR TYPE OF DOCUMENT Articles	of Incorporation
THE PROPERTY OF THE PROPERTY O	- NUMBER OF PAGES DATE OF DOCUMENT	1
I nought the data requested here is not required by law, it could prevent fraudulent reattachment of this form.	SIGNER(S) OTHER THAN NAMED ABC	

....

۲ : د

THE INCORPORATORS have he April, 1996.	prounto set thei	r hands and	d seals this 8th day	y of
Adam M. Mizel	•••			
David L. Wasserman				
G. Terrence Van Gilder	-			
G. Thompson Hutton	_			
Frederich B. L'are	_			
Frederick B. Karl				

STATE OF THE STATE OF

PERSONALLY APPEARED before me, Frederick B. Karl, who acknowledged executing the above Articles of Incorporation of Florida Select Insurance Company.

Notary Public

State of Fig.

My commission expires:

OFFICIAL MOTARY SPAL
ROBIN B PHILIPS
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC277454
MY COMMISSION EXP. MAY 7,1927

ACCEPTANCE OF REGISTERED AGENT

Having been named to accept service of process from the Treasurer and Insurance Commissioner of the State of Florida for Florida Selectionsurance Company, at the place designated in the Articles of Incorporation, CT Corporation System agrees to act in this capacity, and agrees to comply with the provisions of Section 48,091, Florida Statutes (1993), relative to keeping open such office.

Dated: April 8, 1996

CT Corporation System

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

name ວ	f the	listered						
		corpora	tion i	.s:				
F	lorida	Select	Insura	anco	Company			·
name a	nd add	ress of	the r	egis	ered age	nt and	offic	o is:
State T	reasur	er and	Insura	nco ('ommined.		io Cap	itol
T	allaha	BSCC. F	lorida	3239	9=0300		PET .	96 14 36
		•			200	e offi	ASSEE.	29 AH
			TITLE	I	resident		RIDA DA	90
			DATE _					
SIONS OF ICE OF M ON 607.09	THIS C F ALL S Y DUTI 501, F	APACITY STATUTES ES, AND LORIDA	, AND RELAT I AC: STATUT	I FUI PIVE PPT 7	THER AGRI TO THE PROME DUTIES	EE TO (OPER ALL)	E, I H COMPLY VD COM OBLIGA	ereby With Plete Pions
	EEN NAME ON, AT ACT IN SIONS OF	EN NAMED TO ACT ON, AT THE PLACE OF MY DUT!	EN NAMED TO ACCEPT SE ON, AT THE PLACE DESTACT IN THIS CAPACITY SIONS OF ALL STATUTES ON 607.0501, FLORIDA	State Treasurer and Insura (P.O. BOX NO Tallahassee, Florida (CITY/STATE SIGNATE EN NAMED TO ACCEPT SERVICE ACT IN THIS CAPACITY, AND SIGNS OF ALL STATUTES RELATED (D) 607.0501, FLORIDA STATUT	State Treasurer and Insurance (P.O. BOX NOT ACC Tallahassee, Florida 3239 (CITY/STATE/ZI SIGNATURE TITLE F DATE V CEN NAMED TO ACCEPT SERVICE OF PR ACT IN THIS CAPACITY, AND I FUE SIGNS OF ALL STATUTES RELATIVE (IN EXECUTE) AND I ACCEPT TO THE COMMENT OF THE COMMENT O	State Treasurer and Insurance Commission (P.O. BOX NOT ACCEPTABLE) Tallahassee, Florida 32359-0300 (CITY/STATE/ZIP) SIGNATURE (Corporate Commission) TITLE President DATE T-6-96 EN NAMED TO ACCEPT SERVICE OF PROCESS FOR ACT IN THIS CERTACT IN THIS CERTACT IN THIS CAPACITY, AND I FURTHER AGRICUS OF ALL STATUTES RELATIVE TO THE PROCESS FOR MY DUTIES, AND I ACC PT THE DUTIES ON 607.0501, FLORIDA STATUTES.	State Treasurer and Insurance Commissioner. The (P.O. BOX NOT ACCEPTABLE) Tallahassee. Florida 32369-0300 (CITY/STATE/ZIP) SIGNATURE (Corporate offit TITLE President DATE J-16-96 CEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ACCENT ACT IN THIS CAPACITY, AND I FURTHER AGREE TO CAPACITY, AND I FURTHER AGREE TO CAPACITY, AND I FURTHER AGREE TO CAPACITY, AND I ACCEPT THE DUTIES AND IN 607.0501, FLORIDA STATUTES.	state Treasurer and Insurance Commissioner. The Cap (P.O. BOX NOT ACCEPTABLE) Tallahasses. Florida 32359-0300 (CITY/STATE/ZIP) SIGNATURE (Corporate officeout) TITLE President DATE V-6-96 EN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE SERVICE IN THIS CERTIFICATE, I H SIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPANY.