### 2025 FOREIGN PROFIT CORPORATION REINSTATEMENT

**DOCUMENT# 825007** 

**Entity Name: SOMPO AMERICA INSURANCE COMPANY** 

May 19, 2025 Secretary of State 4772415307CR

Certificate of Status Desired: No

**FILED** 

## **Current Principal Place of Business:**

1221 AVENUE OF THE AMERICAS

19TH FLOOR

NEW YORK, NY 10020

## **Current Mailing Address:**

1221 AVENUE OF THE AMERICAS 19TH FLOOR NEW YORK, NY 10020 US

FEI Number: 13-2554270 Certificat

## Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200E. GAINES ST

TALLAHASSEE, FL 32399-0000 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CFO 05/19/2025

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title SECRETARY Title TREASURER, DIRECTOR

Name LURIE, DANIEL S. Name HANA, ENTELA

Address 1221 AVENUE OF THE AMERICAS Address 1221 AVENUE OF THE AMERICAS

19TH FLOOR 19TH FLOOR

City-State-Zip: NEW YORK NY 10020 City-State-Zip: NEW YORK NY 10020

Title DIRECTOR Title PRESIDENT, DIRECTOR

Name LAWRENCE, WINDY L. Name SPARRO, CHRISTOPHER L.

Address 1221 AVENUE OF THE AMERICAS Address 1221 AVENUE OF THE AMERICAS

19TH FLOOR 19TH FLOOR

City-State-Zip: NEW YORK NY 10020 City-State-Zip: NEW YORK NY 10020

Title DIRECTOR Title DIRECTOR

Name DONELAN, CHRISTOPHER Name BURNET, NICOLAS

Address 1221 AVENUE OF THE AMERICAS Address 1221 AVENUE OF THE AMERICAS

19TH FLOOR 19TH FLOOR

City-State-Zip: NEW YORK NY 10020 City-State-Zip: NEW YORK NY 10020

 Title
 DIRECTOR
 Title
 DIRECTOR

 Name
 BOUCHARD, ANN MARIE
 Name
 REILLY, KEN

Address 1221 AVENUE OF THE AMERICAS Address 1221 AVENUE OF THE AMERICAS

19TH FLOOR 19TH FLOOR

City-State-Zip: NEW YORK NY 10020 City-State-Zip: NEW YORK NY 10020

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DANIEL S. LURIE SECRETARY 05/19/2025

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title SENIOR VICE PRESIDENT

Name CALOTTA, JOHN

Address 1221 AVENUE OF THE AMERICAS

19TH FLOOR

City-State-Zip: NEW YORK NY 10020

Title APPOINTED ACTUARY

Name LEMAY, CHRISTIAN

Address 1221 AVENUE OF THE AMERICAS

19TH FLOOR

City-State-Zip: NEW YORK NY 10020

Title ASSISTANT SECRETARY

Name HAYTMAN, LAURA A.

Address 1221 AVENUE OF THE AMERICAS

19TH FLOOR

City-State-Zip: NEW YORK NY 10020

Title SENIOR VICE PRESIDENT, SENIOR

COUNSEL

Name APPEL, RICHARD M.

Address 1221 AVENUE OF THE AMERICAS

19TH FLOOR

City-State-Zip: NEW YORK NY 10020

Title ASSISTANT TREASURER

Name MANNELLO, JAMES

Address 1221 AVENUE OF THE AMERICAS

19TH FLOOR

City-State-Zip: NEW YORK NY 10020

Title ASSISTANT TREASURER

Name SUTCLIFFE, STEVEN

Address 1221 AVENUE OF THE AMERICAS

19TH FLOOR

City-State-Zip: NEW YORK NY 10020