Filing Fee: \$150.00

License Fee: \$15.00 minimum (§7-1.1-124)

ID Number: 2059]



#### STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

#### **BUSINESS CORPORATION**

#### APPLICATION FOR CERTIFICATE OF AUTHORITY (To Be Filed In Duplicate Original)

Pursuant to the provisions of Section 7-1.1-103 of the General Laws, 1956, as amended, the undersigned foreign corporation hereby applies for a Certificate of Authority to transact business in the state of Rhode Island, and for that purpose submits the following statement: 1. The name of the corporation is <u>CBIZ</u> Special Risk Insurance Services, Inc. 2. It is incorporated under the laws of Ohio 3. The name, if different, which it elects to use in Rhode Island is: (a) If the name of the corporation in its jurisdiction of incorporation does not contain the word "corporation," "company," "incorporated," or "limited," or an abbreviation thereof, then list the name of the corporation with the addition of one of the above corporate endings for use in Rhode Island: (b) If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation will qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application: 4. The date of its incorporation is <u>09/24/98</u> and the period of its duration is perpetual 5. The address of its principal office in the state or country under the laws of which it is incorporated is 6480 Rockside Woods Blvd. South, Suite 330 Cleveland, OH 44131 6. The address of its proposed registered office in Rhode Island is 10 Weybosset Street (Street Address, not P.O. Box) Providence RI\_02903 and the name of its proposed registered agent in Rhode Island at (City/Town) (Zip Code) that address is <u>CTCORPORATION SYSTEM</u> (Name of Agent) 7. The specific purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are: consultation and brokerage services/benefits and insurance 8. The names and respective addresses of the directors and officers are: <u>Name</u> Address Director SEE ATTACHED LIST Director President Vice President Treasurer Secretary

Form No 150 Revised: 01/99

33539 - 11 22/99 CT System Online

<u>850</u>	Number of Shares	<u>Class</u> common	<u>Series</u>	Par Value or Statement that Shares are without Par Value no par value
10. The with	aggregate number of its iss in a class, is:	ued shares, itemized by cla	asses, par value of shar	es, shares without par value, and series, if a
<u>l (o</u>	Number of Shares	<u>Class</u> common	<u>Series</u>	Par Value or Statement that Shares are without Par Value no par value
11. (a)	An estimate of the value \$ 225,000.00	of all property to be own	ed by the corporation	for the following year, wherever located, is
(b)	An estimate of the value \$ 0.00	of the corporation's prope	rty to be located withi	n Rhode Island during the following year is
	ocated within this state outli	ng the following year bears.	to the value of all propa	value of the property of the corporation to erty of the corporation to be owned during the multiply by 100 to obtain the percentage].
12. (a) <i>i</i>		amount of business to be		corporation during the following year i
(b) <i>i</i>	An estimate of the gross Island during the following y	amount of business to be ear is \$ 0.00	transacted by the corpo	ration at or from places of business in Rhodo
Ì	porporation at or morn places	OF DUSINESS IN THIS STATE OF	Hring the tollowing year	amount of business to be transacted by the bears to the gross amount thereof which will divide (b) by (a) and multiply by 100 to obtain
3. This by the	application is accompanied e secretary of state or other	by certified copies of its an authorized officer of the jur	ticles of incorporation ar isdiction of its incorpora	nd all amendments thereto, duly authenticat tion.
ate: <u>Au</u>	gust 30, 2001	<u>. (</u>	BIZ Special Risk Insur	ance Services, Inc.
_			Print Ract Nam	e of Corporation Making Application
	BARAY HOWARD SO Notary Public-Notar			White Breeden Advantage
	State of Missou Jackson Count	d	President or	Vice President (check one)
	My Commission Expires M		Jeacy III	, skellara
TATE C	NE Museum		Secretary or	Assistant Secretary (check one)
COUNTY				
efore m	Transfer of Column	e and Nancy W. Mell	day of <u>September</u>	y me first duly sworn, declared that he/sh
	VICE Plesident & Assiver of the corporation, and	stout Souchave of the that the statements here	e corporation and that ein contained are true	the signed the foregoing document

## CBIZ SPECIAL RISK INSURANCE SERVICES, INC. List of Officers and Directors State of Rhode Island

Jerome P. Grisko, Jr.
Director & Executive Vice-President
6480 Rockside Woods Blvd. South, Suite 330
Cleveland, OH 44131

Timothy C. Moynihan President 5353 Mission Center Road, Suite 310 San Diego, CA 92108

Robert A. O'Byrne Executive Vice-President 2600 Grand Blvd. Suite 600 Kansas City, MO 64108-4624

David S. Azzolina Treasurer 6480 Rockside Woods Blvd. South, Suite 330 Cleveland, OH 44131

Felicia P. Young Assistant Treasurer 6480 Rockside Woods Blvd. South, Suite 330 Cleveland, OH 44131

Michael W. Gleespen Secretary 6480 Rockside Woods Blvd. South, Suite 330 Cleveland, OH 44131

Nancy M. Mellard Assistant Secretary 2600 Grand Blvd. Suite 600 Kansas City, MO 64108-4624 DATE DOCUMENT NO DESCRIPTION 9/25/1998 139826700384 ARF DOMESTIC ARTICLES/FOR PROFIT

Return To: C T CORPORATION SYSTEM 17 S'HIGH'ST COLUMBUS, OH 43215-0000

-cut along the dotted line-



# The State of Ohio & Certificate

Secretary of State - Bob Taft

1033063

It is hereby certified that the Secretary of State of Ohio has custody of the business records for NIEDERHOFER ACQUISITION CORP, and that said business records show the filing and recording of:

Ocument(s)
DCMESTIC ARTICLES/FOR PROFIT

<u>Gocument No(s):</u> 1998257G0984

United States of America State of Ohio Office of the Secretary of State



Witness my hand and the seni of the Secretary of State at Columbus, Ohio, This 24th day of September, A.D. 1998

> Bob Taft Secretary of State

### OS3663 UNITED STATES OF AMERICA, STATE OF OHIO, OFFICE OF THE SECRETARY OF STATE

1, J. Kenneth Blackwell, Secretary of State of the State of Ohio, do hereby certify that the foregoing is a true and correct copy, consisting of \_\_\_\_\_\_\_ pages, as taken from the original record now in my official custody as Secretary of State.

WITNESS my hand and official seal at Columbus, Ohio, this \_\_\_\_\_\_ day of \_\_\_\_\_\_ A.D.

th (Sachmell

J. KENNETH BLACKWELL

Secretary of State

NOTICE: This is an official certification only when reproduced in co