

1.) CORPORATION NAME:

IRONSHORE INDEMNITY INC.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI
CORPORATION SERVICE COMPANY
11 S 12TH ST
PO BOX 1463**

RICHMOND, VA 23218

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

MN

DUE DATE: **11/30/2010**

SCC ID NO: **F0376048**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	50,000

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: ONE STATE STREET PLAZA
7TH FLOOR

CITY/ST/ZIP: NEW YORK, NY 10004-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: GREGORY J FLOOD
TITLE: VICE PRESIDENT
ADDRESS: ONE STATE STREET PLAZA
7TH FLOOR
CITY/ST/ZIP/CO: NEW YORK, NY 10004-

OFFICER

DIRECTOR

NAME: FRED MARRA
TITLE: VICE PRESIDENT
ADDRESS: ONE STATE STREET PLAZA
7TH FLOOR
CITY/ST/ZIP/CO: NEW YORK, NY 10004-

OFFICER

DIRECTOR

NAME: SHAUN KELLY
TITLE: PRESIDENT
ADDRESS: ONE STATE STREET PLAZA
7TH FLOOR
CITY/ST/ZIP/CO: NEW YORK, NY 10004-

OFFICER

DIRECTOR

NAME: MICHAEL MITROVIC
TITLE: DIRECTOR
ADDRESS: ONE STATE STREET PLAZA
7TH FLOOR
CITY/ST/ZIP/CO: NEW YORK, NY 10004-

OFFICER

DIRECTOR

NAME: BILL GLEASON TITLE: VP/TREASURER ADDRESS: ONE STATE STREET PLAZA 7TH FLOOR CITY/ST/ZIP/CO: NEW YORK, NY 10004-	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: PAUL GIORDANO TITLE: SECRETARY ADDRESS: ONE STATE STREET PLAZA 7TH FLOOR CITY/ST/ZIP/CO: NEW YORK, NY 10004-	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: KEVIN KELLEY TITLE: CHAIRMAN ADDRESS: ONE STATE STREET PLAZA 7TH FLOOR CITY/ST/ZIP/CO: NEW YORK, NY 10004-	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JOSEPH BOREN TITLE: VICE PRESIDENT ADDRESS: ONE STATE STREET PLAZA 7TH FLOOR CITY/ST/ZIP/CO: NEW YORK, NY 10004-	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ PAUL GIORDANO	PAUL GIORDANO, SECRETARY	10/5/2010
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		