

1.) CORPORATION NAME:

**IRONSHORE INDEMNITY INC.**

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

**AUTH IN VI**

**CORPORATION SERVICE COMPANY**

**Bank of America Center, 16th Floor**

**1111 East Main Street**

**RICHMOND, VA 23219**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**MN**

DUE DATE: **11/30/2011**

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

OFFICER

DIRECTOR

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

OFFICER

DIRECTOR

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: BILL GLEASON  
TITLE: VP/TREASURER  
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-	<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: MICHAEL MITROVIC TITLE: DIRECTOR ADDRESS: ONE STATE STREET PLAZA 7TH FLOOR CITY/ST/ZIP/CO: NEW YORK, NY 10004-	<input 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/ FRED MARRA	FRED MARRA, VICE PRESIDENT	11/2/2011
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.		