

1.) CORPORATION NAME: <b>Mosaic Insurance Company</b>	DUE DATE: <b>1/31/2013</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA 23060-6802</b>	SCC ID NO: <b>F0378945</b>				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>HENRICO COUNTY</b>	5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>50,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	50,000
CLASS	AUTHORIZED				
COMMON	50,000				
4.) STATE OR COUNTRY OF INCORPORATION: <b>DE</b>					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 125 Broad Street

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.

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: RODERICK PERRY		
TITLE: VICE PRESIDENT		
ADDRESS: 125 BROAD STREET		
CITY/ST/ZIP/CO: NEW YORK, NY 10004		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: SUSAN B WILCHER		
TITLE: SECRETARY		
ADDRESS: 125 BROAD STREET		
CITY/ST/ZIP/CO: NEW YORK, NY 10004		

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: CEDRIC DE LINARES		
TITLE: DIRECTOR		
ADDRESS: 125 BROAD STREET		
CITY/ST/ZIP/CO: NEW YORK, NY 10004		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: KLAUS ENDRES		
TITLE: PRESIDENT		
ADDRESS: 125 BROAD STREET		
CITY/ST/ZIP/CO: NEW YORK, NY 10004		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ROBERT WOLF		
TITLE: TREASURER		
ADDRESS: 125 BROAD STREET		
CITY/ST/ZIP/CO: NEW YORK, NY 10004		

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/ SUSAN B WILCHER	SUSAN B WILCHER, SECRETARY	12/21/2012
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.