

1.) CORPORATION NAME: CastlePoint Risk Management of Florida, Corp.	DUE DATE: 7/31/2016				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CORPORATION SERVICE COMPANY BANK OF AMERICA CENTER, 16TH FLOOR 1111 EAST MAIN STREET RICHMOND, VA	SCC ID NO: F1798166				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: RICHMOND CITY	5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:50%;">CLASS</th> <th style="width:50%;">AUTHORIZED</th> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED				
COMMON	1,000				
4.) STATE OR COUNTRY OF INCORPORATION: FL					

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 59 MAIDEN LN 38TH FL CITY/ST/ZIP: NY, NY 10038	
---	--

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: MEGHAN ZEIGLER TITLE: ASST SECRETARY ADDRESS: 59 MAIDEN LN 38TH FL CITY/ST/ZIP/CO: NY, NY 10038	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
--	---	--	--

NAME: ROBERT KARFUNKEL TITLE: SECRETARY ADDRESS: 59 MAIDEN LN 38TH FL CITY/ST/ZIP/CO: NY, NY 10038	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
---	---	-----------------------------------	--

NAME: WILLIAM E HITSSELBERGER TITLE: DIRECTOR ADDRESS: 59 MAIDEN LN 38TH FL CITY/ST/ZIP/CO: NEW YORK, NY 10038	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
---	----------------------------------	--	--

NAME: HERBERT LEMMER TITLE: DIRECTOR ADDRESS: 59 MAIDEN LN 38TH FL CITY/ST/ZIP/CO: NY, NY 10038	<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/ MEGHAN ZEIGLER	MEGHAN ZEIGLER, ASST SECRETARY	7/14/2016
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.