

2019 FOREIGN PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F00000001842

Entity Name: MESA UNDERWRITERS SPECIALTY INSURANCE COMPANY**Current Principal Place of Business:**6263 N SCOTTSDALE ROAD
SUITE 300
SCOTTSDALE, AZ 85250**Current Mailing Address:**6263 N SCOTTSDALE ROAD
SUITE 300
SCOTTSDALE, AZ 85250 US**FEI Number:** 75-1629914**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHIEF FINANCIAL OFFICER
200 E. GAINES ST.
TALLAHASSEE, FL 32399 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** CHIEF FINANCIAL OFFICER

10/10/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name MURPHY, GREGORY E
Address 6263 N SCOTTSDALE ROAD
SUITE 300
City-State-Zip: SCOTTSDALE AZ 85250

Title PRESIDENT
Name KAMROWSKI, JEFFREY F
Address 6263 N SCOTTSDALE ROAD
SUITE 300
City-State-Zip: SCOTTSDALE AZ 85250

Title DIRECTOR
Name MARCHIONI, JOHN J
Address 6263 N SCOTTSDALE ROAD
SUITE 300
City-State-Zip: SCOTTSDALE AZ 85250

Title DIRECTOR
Name WILCOX, MARK A
Address 6263 N SCOTTSDALE ROAD
SUITE 300
City-State-Zip: SCOTTSDALE AZ 85250

Title DIRECTOR, SECRETARY
Name LANZA, MICHAEL H
Address 6263 N SCOTTSDALE ROAD
SUITE 300
City-State-Zip: SCOTTSDALE AZ 85250

Title TREASURER
Name PAI, ROHAN
Address 6263 N SCOTTSDALE ROAD
SUITE 300
City-State-Zip: SCOTTSDALE AZ 85250

Title DIRECTOR
Name SENIA, VINCENT M
Address 6263 N SCOTTSDALE ROAD
SUITE 300
City-State-Zip: SCOTTSDALE AZ 85250

Title DIRECTOR
Name MONTAU-KUPKA, YANINA
Address 6263 N SCOTTSDALE ROAD
SUITE 300
City-State-Zip: SCOTTSDALE AZ 85250

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL H LANZA**SECRETARY**

10/10/2019

Electronic Signature of Signing Officer/Director Detail

Date