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(Requestor's Name)

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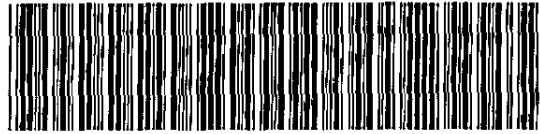
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TALLAHASSEE, FLORIDA

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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032
REFERENCE : 483893 4365966
AUTHORIZATION : Patricia Pizot
COST LIMIT : \$ 70.00

FILED
05 JUL 20 PM 2:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : July 14, 2005
ORDER TIME : 10:11 AM
ORDER NO. : 483893-005
CUSTOMER NO: 4365966
CUSTOMER: Accounts Payable
Stevens & Lee
P.O. Box 679
Reading, PA 19603-0679

FOREIGN FILINGS

NAME: NOVUS INSURANCE COMPANY
(RISK RETENTION GROUP)

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan -- EXT# 2955

EXAMINER:

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Novus Insurance Company (Risk Retention Group)

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp." "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. South Carolina

(State or country under the law of which it is incorporated)

3. 20-2704973

(FEI number, if applicable)

4. May 6, 2005

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. N/A

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. c/o HSBC/Ann West, 1836 Ashley River Road, Suite O, Charleston, SC 29407

(Principal office address)

c/o HSBC/Ann West, 1836 Ashley River Road, Suite O, Charleston, SC 29407

(Current mailing address)

8. Risk retention group providing liability insurance to bariatric and general surgeons, all other lawful purposes

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301-2607

(City) (Zip code)

10. **Registered agent's acceptance:**

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Cynthia L. Harris
(Registered agent's signature)

**Cynthia L. Harris
as its agent**

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____ Please see attached Addendum for list of directors and officers.

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: _____

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. William A. Sweet, M.D.
(Signature of Director or Officer listed in number 12 of the application)

14. William A. Sweet, M.D., President and Director
(Typed or printed name and capacity of person signing application)

**ADDENDUM TO APPLICATION BY FOREIGN CORPORATION
FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

Novus Insurance Company (Risk Retention Group)

Directors:

John W. Baker, M.D.
1 Lile Court, Suite 103
Little Rock, AR 72205

T. Karl Byrne, M.D.
96 Jonathan Lucas Street
P.O. Box 250327
Charleston, SC 29425

George S. Cowan, Jr., M.D.
1835 Forrest Avenue
Memphis, TN 38112-5010

Neil E. Hutcher, M.D.
5855 Bremo Road, Suite 506
Richmond, VA 23226

Kenneth B. Jones, M.D.
1801 Fairfield, Suite 408
Shreveport, LA 71101

William A. Sweet, M.D.
1730 Reading Boulevard
Wyomissing, PA 19610

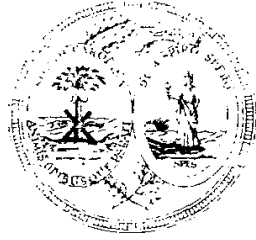
Officers:

President William A. Sweet, M.D.
1730 Reading Boulevard
Wyomissing, PA 19610

Treasurer John W. Baker, M.D.
1 Lile Court, Suite 103
Little Rock, AR 72205

Secretary John W. Baker, M.D.
1 Lile Court, Suite 103
Little Rock, AR 72205

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

NOVUS INSURANCE COMPANY (RISK RETENTION GROUP),
a corporation duly organized under the laws of the State of South Carolina on
May 6th, 2005, and having a perpetual duration unless otherwise indicated
below, has as of the date hereof filed all reports due this office, paid all fees,
taxes and penalties owed to the Secretary of State, that the Secretary of State
has not mailed notice to the Corporation that it is subject to being dissolved by
administrative action pursuant to section 33-14-210 of the South Carolina Code,
and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great
Seal of the State of South Carolina this
19th day of July, 2005.


Mark Hammond, Secretary of State

Note: This certificate does not contain any representation concerning fees or taxes owed by the Corporation to the South Carolina Tax Commission or whether the Corporation has filed the annual reports with the Tax Commission. If it is important to know whether the Corporation has paid all taxes due to the State of South Carolina, and has filed the annual reports, a certificate of compliance must be obtained from the Tax Commission.