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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

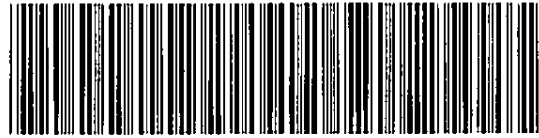
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FL

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### COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Instant Risk Insurance Services Inc.  
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Dan Miller

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Name of Person

Westmont Associates, Inc.

---

Firm/Company

1763 Marlton Pike E, Ste 200

---

Address

Cherry Hill, NJ 08003

---

City/State and Zip code

Daniel@Westmontlaw.com

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E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dan Miller at ( 856 ) 216-0220

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Name of Person                      Area Code                      Daytime Telephone Number

**STREET/COURIER ADDRESS:**  
 Registration Section  
 Division of Corporations  
 The Centre of Tallahassee  
 2415 N. Monroe Street, Suite 810  
 Tallahassee, FL 32303

**MAILING ADDRESS:**  
 Registration Section  
 Division of Corporations  
 P.O. Box 6327  
 Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- \$70.00 Filing Fee    
  \$78.75 Filing Fee & Certificate of Status    
  \$78.75 Filing Fee & Certified Copy    
  \$87.50 Filing Fee, Certificate of Status & Certified Copy

**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.*

1. Instant Risk Insurance Services Inc.  
\_\_\_\_\_  
(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. Delaware \_\_\_\_\_ 3. 33-1975721 \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10/01/2024 \_\_\_\_\_ 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. \_\_\_\_\_  
(Principal office street address)  
1355 Greenwood Cliff, Ste 100, Charlotte, NC 28204  
\_\_\_\_\_  
(Current mailing address, if different)

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

Name: Cogency Global Inc. \_\_\_\_\_

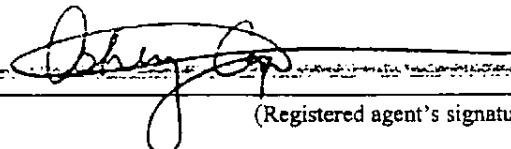
Office Address: 115 N Calhoun St, Ste 4 \_\_\_\_\_

Tallahassee \_\_\_\_\_, Florida 32301 \_\_\_\_\_  
(City) (Zip code)

9. 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.*

SECRET  
TALLAHASSEE  
2025 JAN 21 9:47  
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\_\_\_\_\_  
(Registered agent's signature)

Ashley Cepin, Asst. Secretary

10. 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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

Chairman Name: Jonathan Di Pasquale  
 Vice Chairman Address: 3403-628 Fleet St  
 Director Toronto, ON M5V1A8, Canada  
 President \_\_\_\_\_  
 Vice President \_\_\_\_\_  
 Secretary  Treasurer  
 Other \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: Ian Rabilly  
 Vice Chairman Address: 2030 Peppercorn Ln  
 Director Charlotte, NC, 28205  
 President \_\_\_\_\_  
 Vice President \_\_\_\_\_  
 Secretary  Treasurer  
 Other VP Underwriting  Other \_\_\_\_\_

Chairman Name: Jonathan Finkelstein  
 Vice Chairman Address: 72 Glencairn Ave  
 Director Toronto, ON M4R1M8, Canada  
 President \_\_\_\_\_  
 Vice President \_\_\_\_\_  
 Secretary  Treasurer  
 Other \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: \_\_\_\_\_  
 Vice Chairman Address: \_\_\_\_\_  
 Director \_\_\_\_\_  
 President \_\_\_\_\_  
 Vice President \_\_\_\_\_  
 Secretary  Treasurer  
 Other \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: Andres Perez-Vilarino  
 Vice Chairman Address: 14 Bentley Crescent  
 Director Barrie, ON L4N0Z1  
 President \_\_\_\_\_  
 Vice President \_\_\_\_\_  
 Secretary  Treasurer  
 Other \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: \_\_\_\_\_  
 Vice Chairman Address: \_\_\_\_\_  
 Director \_\_\_\_\_  
 President \_\_\_\_\_  
 Vice President \_\_\_\_\_  
 Secretary  Treasurer  
 Other \_\_\_\_\_  Other \_\_\_\_\_

**Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. Andres Perez-Vilarino  
 \_\_\_\_\_  
88F32AB078DE45C... Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Andres Perez-Vilarino  
 \_\_\_\_\_  
 (Typed or printed name and capacity of person signing application)

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "INSTANT RISK INSURANCE SERVICES INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRD DAY OF DECEMBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "INSTANT RISK INSURANCE SERVICES INC." WAS INCORPORATED ON THE FIRST DAY OF OCTOBER, A.D. 2024.



5341897 8300

SR# 20244365998

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 205012037

Date: 12-03-24



**WESTMONT**  
ASSOCIATES, INC.

January 15, 2025

Attn: Florida Department of State  
Divisions of Corporations  
The Centre of Tallahassee  
2415 N Monroe St, Ste 810  
Tallahassee, FL 32303

Re: Application by Foreign Corporation to Transact Business in Florida  
Instant Risk Insurance Services Inc.  
FEIN: 33-1975721

To Whom It May Concern,

On behalf of Origin Surety Insurance Services LLC please find the below listed items enclosed:

- o Application by Foreign Corporation for Authorization to Transact Business in Florida
- o Certificate of Good Standing from the entity's state of domicile (DE), and
- o A check in the amount of \$125.00 for the filing fee

If you have any questions or require additional information please feel free to reach out to me directly. Westmont Associates, Inc. has been requested to manage this process.

Thank you kindly in advance,

Dan Miller

Analyst

[Daniel@westmontlaw.com](mailto:Daniel@westmontlaw.com)

11W570 JAN 15, 2025 ALL CURR USD 1 OF 1  
SVC 2DA ACT WT 0.2 LBS  
TRACKING# 1Z11W5700268316518  
ACCOUNTS REC: IRC-PRO  
REF 2:  
HANDLING CHARGE 0.00  
SINGLE-PIECE NR RATE CHRG: SVC 25.60 USD  
OV 0.00 COD 0.00 RS 0.00  
DC 0.00 DGD 0.00 SD 0.00  
AH 0.00 PR 0.00 SP 0.00  
TOT NR CHG 25.60 NR+HC 25.60  
TOT CCC CHG 25.60 CCC+HC 25.60  
THIS DOCUMENT IS NOT AN INVOICE.