



**FLORIDA DEPARTMENT OF FINANCIAL SERVICES
OFFICE OF INSURANCE REGULATION**

**APPLICATION FOR CERTIFICATE OF AUTHORITY
MULTIPLE EMPLOYER WELFARE ARRANGEMENTS**

This package is designed to assist individuals in preparing the application with all the information required by statute and facilitate expeditious processing of the application by the Office of Insurance Regulation. This package includes five (5) categories of information:

- Section I - Application Fees and Form
- Section II - Legal
- Section III - Financial and Related Information
- Section IV - Management
- Section V - Forms and Rates

Each of these sections is processed by different bureaus of the Office of Insurance Regulation. Therefore, it is extremely important that the application be completed in its entirety in the format specified.

Please submit your package tabularized in a binder that has been two-hole punched at the top and place tabs at the bottom of the documents. (Example: the tab labeled II-1 would contain the certified Articles of Incorporation).

THE COMPLETED CHECK LIST MUST BE RETURNED WITH THE APPLICATION PACKAGE!

It is recommended that, prior to filing the application, you schedule a pre-filing conference with the Bureau of Life and Health Solvency to go over particular problems encountered in the past. Although the pre-filing conference is not a statutory requirement, it has proven beneficial to both the applicant and the Office of Insurance Regulation. To schedule a conference, please call the Applications Coordination Section at (850)413-2570.

Once the application is complete, mail it to:

Florida Office of Insurance Regulation
Applications Coordination Section
200 East Gaines Street, Larson Building
Tallahassee, Florida 32399-0332

IN ORDER FOR A SUBMISSION TO BE CONSIDERED A COMPLETE APPLICATION, ALL REQUIRED INFORMATION MUST BE INCLUDED IN THE FILING. FILINGS THAT DO NOT INCLUDE ALL REQUIRED INFORMATION WILL BE DISAPPROVED OR RETURNED.