

F07000002407

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

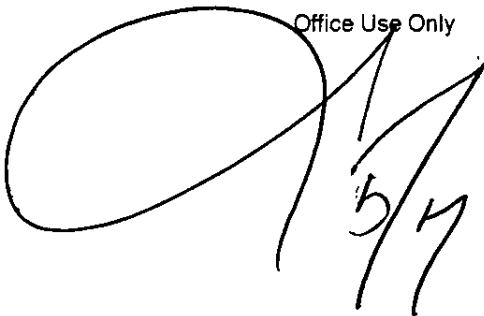
PICK-UP WAIT MAIL

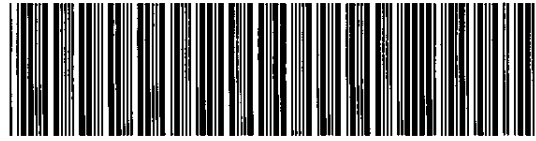
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
07 MAY -4 PM 12: 39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
07 MAY -4 PM 12: 35
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032
REFERENCE : 867464 7329165
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 70.00

ORDER DATE : April 25, 2007
ORDER TIME : 10:23 AM
ORDER NO. : 867464-010
CUSTOMER NO: 7329165

FOREIGN FILINGS

NAME: WELLS FARGO OF CALIFORNIA
INSURANCE SERVICES, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: TROY TODD 2940

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.

1. Wells Fargo of California 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. California 3. 94-1651475
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 12-28-1961 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "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. 45 Fremont Street, Suite 800, San Francisco, CA 94111
(Principal office address)

same
(Current mailing address)

8. insurance agency
(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

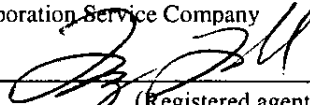
Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(City) (Zip code)

FILED
07 MAY -4 PM 12:39
CLERK OF STATE
TALLAHASSEE, FLORIDA

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.

Corporation Service Company
By: 
(Registered agent's signature) **Troy Todd
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: see list attached

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. *Robert M. Greco*

(Signature of Director or Officer listed in number 12 of the application)

14. Robert M. Greco, Secretary

(Typed or printed name and capacity of person signing application)

April 19, 2007

Officers and Directors
WELLS FARGO OF CALIFORNIA INSURANCE SERVICES, INC.

| Name | Office Held | Business Address |
|--------------------------|--|--|
| Baldwin, Paul E. | Vice President | 4742 N 24 th Street Suite 270 Phoenix, AZ 85016 |
| Broderick, Deborah M. | Senior Vice President Asst. Secretary Director | 150 N. Michigan Avenue Suite 4100 Chicago, IL 60601 |
| Greco, Robert M. | Director Secretary | 150 N. Michigan Avenue Suite 4100 Chicago, IL 60601 |
| Ostermeier, Christine M. | Treasurer | 150 N. Michigan Avenue Suite 4100 Chicago, IL 60601 |
| Rodgers, Stephen K. | President | 45 Fremont Street, Suite 800 San Francisco, CA 94105 |
| Seyfried, Michael | Vice President and Regional Controller | 45 Fremont Street, Suite 800 San Francisco, CA 94105 |
| Van Ness, Gregory W. | Vice President | 11017 Cobblersrock Drive #100 Rancho Cordova, CA 95670 |
| Wood, H. David | Executive Vice President | 4742 N 24 th Street Suite 270 Phoenix, AZ 85016 |

State of California
Secretary of State

CERTIFICATE OF STATUS
DOMESTIC CORPORATION

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

That on the **28th day of December 1961**, **WELLS FARGO OF CALIFORNIA INSURANCE SERVICES, INC.**, became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.

IN WITNESS WHEREOF, I execute
this certificate and affix the Great Seal
of the State of California this day of
April 30, 2007.



Debra Bowen

DEBRA BOWEN
Secretary of State