

2960 North Meridian
P.O. Box 1230
Indianapolis, IN 46206
(317) 927-6500



Secretary of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

100001750281
-04/23/96--01057---0005
*****70.00 *****70.00

Re: Certificate of Status

Dear Sir/Madam:

Western Security Life Insurance Company is a wholly owned subsidiary of Indianapolis Life Insurance Company.

Western Security Life Insurance Company respectfully requests a Certificate of status from the State of Florida. Enclosed please find a completed Application for authorization to transact business, a Certificate of Status from Western's domiciliary state, and a check in the amount of \$70.00 as payment of the required filing fee.

If there is any additional information which you might require, please feel free to contact me.

Sincerely,

Steve Michaels
Legal Assistant
Legal Department
317-927-6541 Direct
317-927-6543 Fax

Enclosures

*Corporation previously qualified 4/5/80
and withdrew 2/14/96 - see #846163*

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DIVISION OF CORPORATIONS
96 APR 22 AM 8:50

4/24

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. WESTERN SECURITY LIFE INSURANCE COMPANY
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. ARTIZONA
(State or country under the law of which it is incorporated)
3. 75-1233841
(FEI number, if applicable)
4. 7-27-66
(Date of Incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. 6-1-90
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.)
7. PO Box 7161
Indianapolis, IN 46207-7161
(Current mailing address)
8. Insurance sales
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent:
Name: Insurance Commissioner
Office Address: Capitol
Tallahassee, Florida, 32399-3300
(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.

(Registered agent's signature)
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.

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

A. DIRECTORS

Chairman: Larry R. Prible

Address: 2960 North Meridian Street
Indianapolis, IN 46208

Vice Chairman: William L. Boyd

Address: 2960 North Meridian Street
Indianapolis, IN 46208

Director: Gregory J. Carney

Address: 2960 North Meridian Street
Indianapolis, IN 46208

Director: John J. Fahrenbach

Address: 2960 North Meridian Street
Indianapolis, IN 46208

B. OFFICERS

President: Marc D. Novotney

Address: 2960 North Meridian Street
Indianapolis, IN 46208

Vice President: A. Grant Hemphill

Address: 2960 North Meridian Street
Indianapolis, IN 46208

Secretary: Margaret H. McKinney

Address: 2960 North Meridian Street
Indianapolis, IN 46208

Treasurer: Gene E. Trueblood

Address: 2960 North Meridian Street
Indianapolis, IN 46208

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

13. Margaret M. McKinney
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Margaret M. McKinney
(Typed or printed name and capacity of person signing application)

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

ADDENDUM

12. DIRECTORS (cont'd)

**Stephen J. Shorrock
65 Froehlich Farm Boulevard
Woodbury, NY 11797**

**Garrett P. Ryan
2960 North Meridian Street
Indianapolis, IN 46208**

13. OFFICERS (cont'd)

**John J. Fahrenbach, CEO
2960 North Meridian Street
Indianapolis, IN 46208**

**Ross E. Meyer, VP Technology
2960 North Meridian Street
Indianapolis, IN 46208**

**Robert J. Schnell, VP Operations
2960 North Meridian Street
Indianapolis, IN 46208**

**Rebecca K. Rissen, Assistant Secretary
2960 North Meridian Street
Indianapolis, IN 46208**

State of Arizona

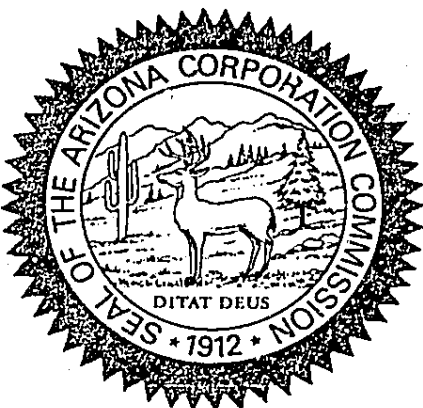


OFFICE OF THE CORPORATION COMMISSION

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DIVISION OF CORPORATIONS
96 APR 22 AM 8:50

TO ALL TO WHOM THESE PRESENTS SHALL COME, GREETING:

I, JAMES MATTHEWS, EXECUTIVE SECRETARY OF THE ARIZONA CORPORATION COMMISSION, DO HEREBY CERTIFY THAT WESTERN SECURITY LIFE INSURANCE COMPANY DID ON THE 27TH DAY OF JULY, 1966, FILE ARTICLES OF INCORPORATION AS A NON-FILING INSURANCE COMPANY.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of the Arizona Corporation Commission. Done at Phoenix, the Capital, this

8TH day of MARCH,
19 96, A.D.

James Matthews
EXECUTIVE SECRETARY

BY *J. Lane Moore*