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Annual Report	Foreign	
Fictitious Name	Limited Partnership	
Name Reservation	Reinstatement	
	Trademark	
	Other	l

# 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:

ARROWHEAD CLAIMS MANAGEMENT, INC.	ED", "COMPANY", "CORPORATION" or words or abbreviations
(Name of corporation: must include the word "INCORPORATE of like import in language as will clearly indicate that it is a co-contained in the name at present.)	orporation instead of a natural person or partnership if not so
CALIFORNIA	3. 33-0828851
(State or country under the law of which it is incorporated)	(FEI number, if applicable)
4. 11 <i>/4/</i> 98	5. PERPETUAL
(Date of Incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6. UPON ACCEPTANCE	
(Date first transacted business in Florida. (SEE S	SECTIONS 607.1501, 607.1502, AND 817.155, F.S.)
7 6055 LUSK BOULEVARD	
/·	
SAN DIEGO CA 92121	The second secon
(Current m	nailing address)
8. INSURANCE CLAIMS ADJUSTING AND LITIGATION	
(Purpose(s) of corporation authorized in home sta	ate or country to be carried out in the state of Florida)
9. Name and street address of Florida registered ag	
Name: HIQ CORPORATE SERVICES, IN	
Office Address: 526 EAST PARK AVEN	UE, SUITE 200  JEC - LANGE OF STATE OF
TALLAHASSEE	, Florida, 32301
TALLAHAGSEL	(Zip Code) $\omega$
	(Zip Code) S 52
10. Registered agent's acceptance:	>'
10. Megisteren agent a acceptance.	·
Having been named as registered agent and to accept place designated in this application, I hereby accept to capacity. I further agree to comply with the provisions of my duties, and I am familiar with and accept the ob-	t service of process for the above stated corporation at the appointment as registered agent and agree to act in the fall statutes relative to the proper and complete performance bligations of my position as registered agent.  C. BY: ROXANNE D. MONIODIS, SECRETARY
Having been named as registered agent and to accept place designated in this application, I hereby accept to capacity. I further agree to comply with the provisions of my duties, and I am familiar with and accept the observable HIQ CORPORATE SERVICES, INC.	he appointment as registered agent and agree to act in in fall statutes relative to the proper and complete performand bligations of my position as registered agent.

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.

STF FL32376F.3

A. DIRECTORS (Street address only- P. O. Box NOT acceptable) Chairman: SEE ATTACHED Address: Vice Chairman: Address: Director: Address: Director: B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: SEE ATTACHED Address: Vice President: Address: Secretary: Address: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 14. Kevin McDonald - President (Typed or printed name and capacity of person signing application)

12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable)

## Officers and Directors of Arrowhead Claims Management, Inc.

Kevin McDonald

President/Director

16987 Boulder Oaks Dr. Ramona, CA 92065 SSN: 544-56-4346 Date of Office: 11/4/98

Marianne Harmon

Sec/Treas/Director

15763 Puerta Del Sol PO Box 7271 Rancho Santa Fe, Ca 92067

SSN: 547-29-8853

Patrick J. Kilkenny

Director

500 W. Harbor Dr.,#1301 San Diego, CA 92101 SSN: 540-64-2184 Date of Office: 11/4/98

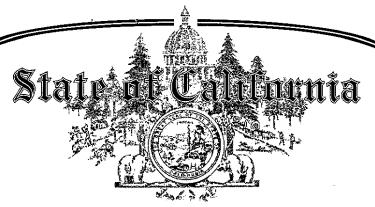
Kelly I Hale

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Director

1124 SW Myrtle
Portland, OR 97201
SSN: 540-64-2183
Date of Office: 11/4/98

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SECRETARY OF STATE
ANASSEE FLORIDA

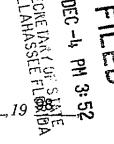


#### SECRETARY OF STATE

### CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, BILL JONES, Secretary of State of the State of California, hereby certify:

That on the \_\_\_\_\_4th \_\_\_\_day of \_\_\_\_\_November



#### ARROWHEAD CLAIMS MANAGEMENT, INC.

became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That no record exists in this office of a certificate of dissolution of said corporation nor of a court order declaring dissolution thereof, nor of a merger or consolidation which terminated its existence; 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

November 20, 1998

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Secretary of State