

Professional Insurance
 Consulting Service
 660 E. Jefferson St.
 Tallahassee, Florida 32301

F99000005347

Sandee Rousser (850) 224-9789
 Fax (850) 224-9927

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____ (Corporation Name) _____ (Document #)
2. _____ (Corporation Name) _____ (Document #)
3. _____ (Corporation Name) _____ (Document #)
4. _____ (Corporation Name) _____ (Document #)

99 OCT 18 AM 9:41
 SECRETARY OF CORPORATIONS
 FLORIDA STATE

- Walk in
 Pick up time _____
 Certified Copy
 Mail out
 Will wait
 Photocopy
 Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

400003017844--2
 -10/19/99--01011--012
 *****78.75 *****78.75

10

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

CF-70.00
 CERT 8.75

BKC 10/18/99

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

August 25, 1999

SANDEE ROUSSER
PROFESSIONAL INSURANCE CONSULTING SERV.
TALLAHASSEE, FL

SUBJECT: DIAMOND INSURANCE COMPANY
Ref. Number: W99000019760

FILED
DIVISION OF STATE CORPORATIONS
99 OCT 18 AM 9:11

We have received your document for DIAMOND INSURANCE COMPANY and check(s) totaling \$78.75. However, your check(s) and document are being returned for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

In Item 6, you should use the words "UPON QUALIFICATION" or list a DATE

Insurance companies must appoint the FLORIDA INSURANCE COMMISSIONER as the Registered Agent. The Commissioner does NOT have to sign the R.A. acceptance statement. (But presumably the insurance company has filed all the necessary documents with the Department of Insurance.)

ALSO, because the Insurance Commissioner is going to be the Registered Agent, the corporation DOES NOT NEED TO PAY a Registered Agent designation fee of \$35.00.

Therefore the TOTAL AMOUNT required to file your corporation will not be \$70.00, but only \$35.00.

And if you want a Certificate of Status, there will be an additional \$8.75 charge.

Please note that we are RETURNING your \$78.75 check, and when you return your filing, you should ONLY SEND \$43.75.

RECEIVED
99 OCT 18 PM 3:33
DIVISION OF STATE CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
DIVISION OF CORPORATIONS
99 OCT 18 AM 9:41

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6914.

Buck Kohr
Corporate Specialist

Letter Number: 199A00042720

TRANSMITTAL LETTER

FILED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
99 OCT 18 AM 9:41

To: Qualification/Tax Lien Section
Division of Corporations

DIAMOND INSURANCE COMPANY OF AMERICA

SUBJECT: _____
(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", 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:

Roy E. Gill

(Name of Person)

Gill & Associates

(Firm/Company)

7238 E. Montebello Ave.

(Address)

Scottsdale, AZ 85250

(City/State/Zip)

Should you need to call someone concerning this matter, please call:

Roy E. Gill at (480) 607-1602
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RECEIVED
99 AUG 25 PM 3:26
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Enclosed is a check for the following amount:

- \$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

GILL & ASSOCIATES

Roy E. Gill, CFE • Regulatory Insurance Consultant

99 OCT 18 AM 9:41
DIVISION OF CORPORATIONS
STATE OF FLORIDA

October 14, 1999

Mr. Doug Dickinson
Document Specialist
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

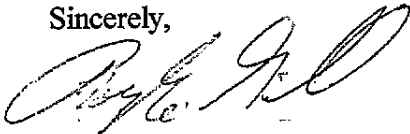
Re: **Diamond Insurance Company**
Certificate of Status

Please find enclosed following:

1. Properly completed "Application by Foreign Corporation for Authorization to Transact Business in Florida".
2. An original Certificate of Existence issued by the State of Illinois.
3. Check #1968 in the amount of \$78.75 for the filing fee and Certificate of Status.
4. The completed "Transmittal Letter".
5. Resolution of Board of Directors for name to be used in Florida.

Thanks for your assistance.

Sincerely,



Roy E. Gill, CFE
Regulatory Insurance Consultant

Enclosures

C: Thomas Stewart, President

RECEIVED
DIVISION OF CORPORATIONS
99 OCT 18 AM 9:41

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned Thomas W. Stewart, do hereby certify
(Name)

that this Resolution of the Board of Directors of Diamond Insurance Company
(Corporate Name)

a corporation duly organized and existing under the laws of the State of Illinois,
was duly adopted on September 17, 19 99.

Be it resolved, that Diamond Insurance Company
(Corporate Name)
organized and existing in the State of Illinois, hereby adopts the name
Diamond Insurance Company for use in Florida.
of America

Dated: September 17, 1999

Thomas W. Stewart President
Signature of either Chairman, Vice Chairman or any officer

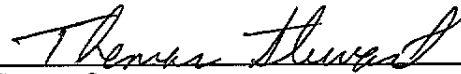
THOMAS W. STEWART
Type or print name

Corporate Resolution
of the Board of Directors of Diamond Insurance Company

DEPT. OF STATE
DIVISION OF CORPORATIONS
99 OCT 18 AM 9:41

I HEREBY CERTIFY that at a meeting, duly called of the board of Directors of Diamond Insurance Company, a corporation held on the 17th day of September, 1999 in Northbrook, Illinois at which meeting a quorum was present and acting throughout the following was adopted:

BE IT RESOLVED that Diamond Insurance Company, organized and existing in the State of Illinois, hereby adopts the name "Diamond Insurance Company of America " for use in the state of Florida.

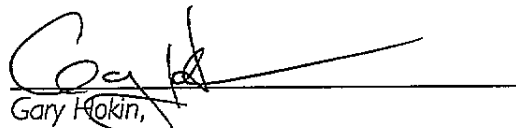


Thomas Stewart
President, Diamond Insurance Company

I, Gary Hokin, Secretary of Diamond Insurance Company hereby certify that the above resolution has been adopted by the Board of Directors of Diamond Insurance Company on the 17th day of September, 1999 which time a majority of the Board of Directors was present and voted in favor of the above resolution. I hereby certify that this resolution has not been repealed and is currently in full force and effect.

In witness thereof I have hereto set my hand and affixed the seal of said Corporation this 17th day of September 1999.

Corporate seal



Gary Hokin,
Secretary Diamond Insurance Company

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.

FILED
DEPARTMENT OF STATE
CORPORATIONS
99 OCT 8 AM 9:41

1. DIAMOND 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. Illinois 3. 364078001
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 4-18-1996 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Upon Qualification
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 40 Skokie Boulevard, Suite 105
Northbrook, IL 60062
(Current mailing address)

8. Insurance
(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 or Mail Drop Box NOT acceptable)

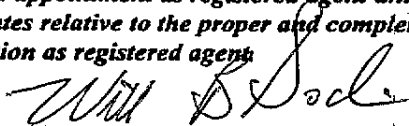
Name: Bill Godwin

Office Address: 660 East Jefferson Street

Tallahassee, Florida, 32301
(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.

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

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: DAVID HOKIN

Address: 40 SKOKIE BLVD SUITE 105
NORTHBROOK, ILLINOIS 60062

Vice Chairman: ROBERT HARTMAN

Address: 6633 NORTH LINCOLN AVENUE
LINCOLNWOOD, ILLINOIS 60645

Director: THOMAS STEWART

Address: 40 SKOKIE BLVD, SUITE 105
NORTHBROOK, ILLINOIS 60062

Director: GARY S. HOKIN

Address: 40 SKOKIE BLVD, SUITE 105
NORTHBROOK, ILLINOIS 60062

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: THOMAS STEWART

Address: 40 SKOKIE BLVD, SUITE 105
NORTHBROOK, ILLINOIS 60062

Vice President: ROBERT HARTMAN

Address: 6633 NORTH LINCOLN AVENUE
LINCOLNWOOD, ILLINOIS 60645

Secretary: GARY S. HOKIN

Address: 40 SKOKIE BLVD, SUITE 105
NORTHBROOK, ILL 60062

Treasurer: DAVID HOKIN

Address: 40 SKOKIE BLVD SUITE 105
NORTHBROOK, ILL. 60062

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

13. Thomas W. Stewart
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Thomas W. Stewart, President
(Typed or printed name and capacity of person signing application)

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STATE OF ILLINOIS
OCT 18 AM 9:11

STATE OF ILLINOIS

DEPARTMENT OF INSURANCE



FILED
STATE DEPARTMENT OF CORPORATIONS
99 OCT 18 AM 9:41

This is to certify that **Diamond Insurance Company**, Northbrook, Illinois, was incorporated on April 18, 1996 pursuant to Article II of Chapter 215 of the Illinois Compiled Statutes.

IN WITNESS WHEREOF, I hereto set
my hand and cause to be affixed the
Seal of my office.

Done at the City of Springfield, this
11th day of August, A. D. 1999.

Nathaniel S. Shapo

Nathaniel S. Shapo
Director