



THE UNITED STATES  
CORPORATION  
COMPANY

# F000000001537

ACCOUNT NO. : 072100000032

REFERENCE : 625528 5163348

AUTHORIZATION :

COST LIMIT : \$ 70.00

ORDER DATE : March 15, 2000

ORDER TIME : 10:36 AM

ORDER NO. : 625528-090

CUSTOMER NO: 5163348

CUSTOMER: Ms. Lynn Hines.  
Channelpoint, Inc.  
10155 Westmoor Drive  
Suite 210  
Westminster, CO 80020

200003177632--9

FOREIGN FILINGS

NAME: CHANNELPOINT 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: Janna Wilson

4

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 MAR 21 PM 2:16

RECEIVED  
00 MAR 21 AM 11:26  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

hxc  
3/21/00

## TRANSMITTAL LETTER

To: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: ChannelPoint Insurance Services, Inc.  
(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:

Julie A. Brooks

(Name of Person)

ChannelPoint, Inc.

(Firm/Company)

10155 Westmoor Drive, Ste. 210

(Address)

Westminster, CO 80021

(City/State/Zip)

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

Julie A. Brooks

(Name of Person)

at ( 303 ) 410-6103

(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

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 MAR 21 PM 2:16

**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  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
80 MAR 21 PM 2:16

1. ChannelPoint Insurance Services, Inc.

(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. Delaware

(State or country under the law of which it is incorporated)

3. 84-149-2806

(FEI number, if applicable)

4. 1/25/99

(Date of incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or "perpetual")

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

7. ChannelPoint, Inc.

5755 Mark Dabbling Blvd., Colorado Springs, CO 80919

(Current mailing address)

Provides services that facilitates insurance brokers and customers to obtain access to quotes, proposals and policy information via the Internet.

8. \_\_\_\_\_  
(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: Corporation Service Company

Office Address: 1201 Hays 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.*

Corporation Service Company

By: Robbie Hall

(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: See attached officers/directors rider

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

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

President: See attached officers/directors rider

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 MAR 21 PM 2:16

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

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

14. Julie A. Brooks, VP & General Counsel

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



**CHANNELPOINT INSURANCE SERVICES, INC.  
LIST OF OFFICERS AND DIRECTORS**

<b>NAME</b>	<b>TITLE</b>	<b>BUSINESS ADDRESS</b>
Kenneth E. Hollen	President & CEO	5755 Mark Dabling Blvd. Colorado Springs, CO 80919
Timothy D. Hoogheem	Sr. Vice President & CFO, Treasurer & Assistant Secretary	10155 Westmoor Drive, Ste. 210 Westminster, CO 80021
Julie A. Brooks	Vice President	10155 Westmoor Drive, Ste. 210 Westminster, CO 80021
Gale Cole	Vice President	5755 Mark Dabling Blvd. Colorado Springs, CO 80919
Dave Corkum	Vice President	5755 Mark Dabling Blvd. Colorado Springs, CO 80919
Marc Neely	Vice President	5755 Mark Dabling Blvd. Colorado Springs, CO 80919
Paul Martino	Vice President	5755 Mark Dabling Blvd. Colorado Springs, CO 80919
Dan Sauer	Vice President	5755 Mark Dabling Blvd. Colorado Springs, CO 80919

***DIRECTORS:***

<b>NAME</b>	<b>TITLE</b>	<b>BUSINESS ADDRESS</b>
Kenneth E. Hollen	Director	5755 Mark Dabling Blvd. Colorado Springs, CO 80919
Timothy D. Hoogheem	Director	10155 Westmoor Drive, Ste. 210 Westminster, CO 80021
Julie A. Brooks	Director	10155 Westmoor Drive, Ste. 210 Westminster, CO 80021

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 MAR 21 PM 2:16

*State of Delaware*  
*Office of the Secretary of State*

---

PAGE 1

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 MAR 21 PM 2:16

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CHANNELPOINT INSURANCE SERVICES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTEENTH DAY OF MARCH, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CHANNELPOINT INSURANCE SERVICES, INC." WAS INCORPORATED ON THE TWENTY-FIFTH DAY OF JANUARY, A.D. 1999.



  
\_\_\_\_\_  
Edward J. Freel, Secretary of State

2992381 8300

001132734

AUTHENTICATION:

0318779

DATE:

03-16-00